Monday 10:00-10:25
CSOS poster: Adult | Chronic conditions
Occupational experience: breast cancer survivors with cancer-related cognitive impairment
Kirstin Yuzwa University of Toronto, Rebecca Graham University of Toronto, Lori Bernstein University Health Network, Princess Margaret Cancer Centre, Deirdre Dawson University of Toronto, Shlomit Rotenberg University of Toronto

Introduction: Cancer related cognitive impairment (CRCI) is a common adverse effect of cancer treatment that, when persistent, can negatively impact functioning in work, social, and leisure activities. Occupational experience includes the subjective qualities that individuals associate with activity participation, such as meaning, pleasure or choice. This work presents a mixed methods study exploring occupational experience in breast cancer survivors reporting CRCI. Objectives: 1) To describe occupational experience in breast cancer survivors and its relationship with cognitive functioning, CRCI, mood, and quality-of-life; 2) To describe the personal and environmental factors that breast cancer survivors perceive to affect their activity participation and occupational experience. Methods: This study uses a mixed methods approach. Breast cancer survivors (target N=25) who report CRCI will complete an online cognitive assessment and questionnaires on occupational experience, cognition in everyday life, depression and quality-of-life. A subsample of 10 participants will complete an in-depth semi-structured interview (via video conferencing) regarding occupational experience and informed by responses on the questionnaires. Results: Preliminary results will be presented that include descriptive statistics of occupational experience questionnaires and their association with CRCI and quality-of-life, in addition to interpretive thematic analysis of the qualitative interviews. Conclusion: This mixed methods study is collecting unique data describing the occupational experience of breast cancer survivors with CRCI. The results may help to better inform therapists working with breast cancer survivors and provide an evidence-base for intervention development targeting the occupational needs of individuals with CRCI.

Key words | mots clés : *Cancer, Occupational science*

Monday 10:00-10:25
Poster defense: Adult | Health and well-being
Contributions of occupational therapy intervention to quality of life
Janelle Fontaine, Carrie Stanley, Britney Ward

Introduction: Occupational therapy theoretical and practice models highlight that engagement in occupation promotes quality of life (QOL), a multidimensional construct including subjective domains of health and well-being. Despite this assertion, evidence supporting occupational therapists' impact on QOL is not well summarized in the literature. Objectives: To investigate how occupational therapists intervene at the person, environment and occupation level to promote QOL and identify what occupational therapy interventions are reported to improve QOL. Methods: We conducted a scoping review using the Arksey and O'Malley Framework (2005). The authors searched five databases using occupational therapy intervention-related and quality of life-related terms. Only RCTs with an adult population were included. Data were extracted from each article, analyzed with descriptive statistics and categorized according to person, environment, and occupation to highlight the different areas where occupational therapists intervene. Results: Eighteen publications met the inclusion criteria. Eleven randomized controlled studies showed interventions that successfully increased QOL, while seven studies did not see significant differences between the occupational therapy intervention group and the control groups. Key themes identified included multiple ways of measuring QOL, the use of education and meaningful activities, and individualized client-centered approaches to guide the intervention process. Eleven studies found significant between group differences for QOL, while all studies found improvements in some aspect of the participant's life. Conclusion: Several studies identified occupational therapy intervention as a means to increase QOL. Our findings demonstrated the value of OT intervention for enhancing QOL and can inform clinicians and researchers regarding treatment.

Key words | mots clés : *Models, Occupational justice*

Monday 10:00-12:30
Hands-on learning session: Community/Population | Occupational therapy education
"Off the side of my desk": Equity-as-occupation in academia
Hiba Zafran McGill University, Marie-Lyne Grenier McGill University

Introduction. We cannot deny that Canadian occupational therapy (OT) educational programs reproduce colonial, racist and ableist harms. Frameworks for Equity, Diversity and Inclusion (EDI) efforts to address institutional racism in OT curricula exist (Suarez Balcazar et al, 2020). Yet the barriers to doing equity work is absent from EDI language (Stewart, 2017). The tensions between aspirational EDI plans and the everyday challenges of equity-as-occupation reveal pertinent questions and anti-oppressive strategies for OT curricular content, structures and processes. Objectives. Participants responsible for designing and implementing OT education will (1) analyze the link between the realities of doing equity work and how systemic oppression operates, (2) identify the limitations of dominant EDI discourse in OT curricula, and (3) discuss complementary lenses and curricular strategies to achieve EDI indicators. Description of session. This 2-hour session begins with a 15-minute introduction and narrative illustration of the fraught nature of equity-as-occupation (Zafran, in press). This will be followed by 20-minutes in small groups where participants will discuss their own experiences in doing equity work. A 20-minute large group discussion will support relating participant experiences to levels of institutional oppression (Ahmed, 2012; Jones, 2000). After a 5-min break, a 25-minute presentation on the limitations of current EDI approaches in academia will be outlined. Concepts and strategies that centre harm reduction, repair and redistribution will be proposed for the hidden curriculum (Hafferty, 1998; Harris, & Wasilewski,

2004). Participants will return to their breakout rooms for 20-minutes to revisit and reframe their experiences and strategies. We will conclude with 15-minutes to collectively generate key messages for an OT education that is critically inclusive. Practice implications. Individuals doing equity "off the side of their desks" (Zafran et al, 2019), and the gap between ethics and outcomes, is partly attributable to the language of EDI frameworks that maintain neoliberal academic structures. Participants will be provided with a guide for socially accountable (Clithero et al, 2017) curricular decision-making. Conclusions. When centred as a historical, transgenerational, relational and collectively lived occupation, the moral (in)tensions of doing equity work in educational institutions can be reconfigured to be participatory, meaningful and impactful.

Key words | mots clés : *Advocacy, Theory*

Monday 10:00-10:25
Paper presentation: Adult | Chronic conditions
Utilizing driving simulators for persons with Multiple Sclerosis: Scoping review
Sarah Krasniuk Western University, Melissa Knott Western University, Reem Bagajati Western University, Liliana Alvarez Western University

Introduction. Persons with Multiple Sclerosis (PwMS) experience visual, cognitive, and motor impairments that can impact their driving fitness. Though driving simulators are used in the assessment and intervention of driving performance among medically at-risk drivers, their specific utility in supporting drivers with MS is not fully understood. Objectives. This scoping review synopsized and mapped the evidence on: the utility of driving simulators for PwMS; the demographic characteristics suited to simulator use; and the scenarios and outcomes reflective of driving performance. Methods. Following the Arksey and O'Malley (2005) and Tricco, et al., (2018) frameworks, our search strategy included concepts related to "MS, " "driving, " and "simulation, " and targeted six databases to obtain published research in English. Reviewer pairs used the Revtools package in R-Studio (Westgate, 2019) to independently screen 956 unique titles, 128 abstracts, and 13 full-text articles. Results. 10 driving simulator studies (9 assessment, 1 intervention) published between 2001 and 2020 were included. Most participants were female (M age 36 to 50 years), with relapsing-remitting MS, and low to moderate physical disability. Most driving simulator scenarios included straight highway drives with secondary divided attention tasks, and outcomes related to adjustment to stimuli, lane maintenance, or speed regulation. Conclusions. The evidence on the utility of driving simulators for PwMS is limited to assessment of driving performance during straight highway drives. Further research should consider exploring how driving simulators can be utilized to assess driving performance in other environments or for intervention. Furthermore, gender should be examined to support gender diverse populations.

Key words | mots clés : *Multiple sclerosis, Technology*

Monday 10:00-10:25
Poster defense: Community/Population | General/Professional issues/Practice
An urgent call for sustainable occupational therapy practice in Canada
Husna Fareed University of Toronto, Bismah Khalid University of Toronto, Alexander Davis Arizona State University, Jane Davis University of Toronto, Janet Craik University of Toronto

Introduction: Canadian occupational therapists have been slow to embed sustainability into practice. Sustainable practice includes principles of ecological integrity, social equity, and economic inclusion (World Commission on Environment and Development, 1987). Globally, communities are experiencing increasing environmental (e.g., natural disasters) and social (e.g., COVID-19) crises that have magnified long-standing systemic patterns of discrimination (e.g., racism, poverty). These patterns of discrimination have contributed to rising social inequities and economic exclusion that further drive disparities in health and occupational participation. In 2018, the World Federation of Occupational Therapists provided initial guidelines on integrating sustainability principles into occupational therapy practice. Research suggests that Canadian occupational therapists have a positive attitude toward sustainability but remain uncertain on how to incorporate it into practice (Chan et al., 2020). Objectives: This study will aim to describe and characterize the sustainability principles discussed within relevant documents in the context of occupational therapy practice within the Canadian healthcare system. Methods: A scoping review will be used to identify relevant documents published between 2000 to 2020 from four databases and the grey literature. The data collected discussing sustainability principles will be analyzed using descriptive statistics and thematic analysis. Results: Projected results will showcase that occupational therapy practice is minimally informed by sustainability principles within the Canadian context. Conclusion: Collectively, occupational therapists must act as change agents for sustainability in the Canadian healthcare context. To do this, occupational therapy educational, professional, and regulatory institutions need to integrate sustainability principles into occupational therapy practice models, theories, curricula, and standards of practice.

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

Monday 10:00-10:25
Paper presentation: Older Adult | Primary care/Primary healthcare/Population health
Qualitative evaluation of the Same Day Home joint replacement program
Ryanne Perinpanayagam McMaster University, Luxcika Krishnapillai McMaster University, Tara Packham McMaster University, Kim Madden St. Joseph's Healthcare Hamilton

Introduction: The Same Day Home (SDH) joint replacement program is offered to select candidates who require a total hip and/or knee arthroplasty, meet strict eligibility criteria and have a care partner at home, allowing them to be discharged the same day as surgery without prolonged stay in hospital. Objective: The primary objective of this study was to understand the perceived facilitators and barriers when participating in the SDH program, in order to inform improvements to the program from a client and care partner perspective. Methods: Using an interpretive description framework, semi-structured interviews were conducted virtually with SDH program patients and care partners. Descriptive content analysis was used to examine the data. Results: Ten interviews were conducted: eight with patient-care partner dyads, and two with patient participants only. This yielded a total of 18 participants (female n = 10, male n = 8). From the analysis, the main themes identified were: 1) safe and comfortable space to ease transition home; 2) trust and support from care partner, surgical and rehabilitation team throughout preparation and recovery; 3) building patient's self-efficacy; 4) engagement in activities and treatment regimes; and 5) personal and external factors influencing expectations for recovery. Conclusion: The results provide key insights informing future recommendations to the SDH program

from clients and care partners' perspectives. Suggestions include assisting clients with identifying suitable care partners, education on medication management and updating rehabilitation protocols for new surgical techniques.

Key words | mots clés : *Evaluation, Orthopaedics*

Monday 10:00-10:25
Paper presentation: Community/Population | General/Professional issues/Practice
Virtual Adoption and Utilization in a Homecare Organization
Brydne Edwards VHA Home Healthcare

Introduction: Virtual care (VC), such as the provision of healthcare using the telephone and/or videoconferencing, is an important service delivery method for homecare service providers (SPs), including occupational therapists, as VC enhances access to services, promotes patient engagement and improves outcomes. Objectives: This paper presentation focuses on the implementation and evaluation of a homecare organization's rehabilitation VC program. Methods: Program implementation involved modifying traditional workflow and documentation practices. Multiple education strategies were adopted to train all SPs. A survey was administered to SPs and patients to evaluate the perceived efficacy of VC, which informed changes to workflow, training, and patient support. Finally, patient interviews added depth to the survey findings. Results: The SP survey showed that SPs used both the telephone and videoconferencing methods to delivery care, and that both can be appropriate tools to meet patient needs. The patient survey suggested that VC is an effective method of service delivery. Some SPs felt that using the telephone was not an effective method of providing clinical education to patients and they were concerned about information security. However, patients reported they felt their information was secure and protected. Preliminary interview results suggest that patients value the integration of VC in their care plan. Conclusions: VC is an effective service delivery method for homecare SPs, as it can facilitate patient engagement, healthcare accessibility, as well as patient and SP safety. This presentation will conclude with a description of how the evaluation results informed ongoing modifications to sustain the rehab VC program.

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

Monday 10:00-11:00
Extended discussion: Child | Primary care/Primary healthcare/Population health
Comment favoriser l'accès aux services d'ergothérapie de première ligne pour les enfants?
Audrée Jeanne Beaudoin Institut universitaire de première ligne en santé et services sociaux (CIUSSS de l'Estrie - CHUS), Marilyn Gagnon Institut universitaire de première ligne en santé et services sociaux (CIUSSS de l'Estrie - CHUS), Julie Ouellette CIUSSS de l'Estrie - CHUS

Introduction : Sachant que les enfants qui éprouvent des difficultés développementales ont besoin d'un soutien adapté à leur situation pour réaliser leur plein potentiel, il est essentiel d'offrir des interventions adaptées à leurs besoins (Duradt & Guay, 2011). Toutefois, un défi de taille sur le plan de la santé publique demeure l'atteinte de la population cible. En effet, les familles vulnérables sont celles qui utilisent le moins les services disponibles (Poissant, 2014). Objectifs : Discuter de stratégies à mettre en

place pour développer une offre de services basée sur les données probantes, qui rejoint les familles vulnérables et qui répond à leurs besoins réels. Description de la séance : Premièrement, une présentation des concepts-clés à considérer lors du développement d'une offre de services de première ligne en ergothérapie pédiatrique issus de la littérature seront présentés aux participants (ex. : universalisme proportionné, collaboration et concertation avec les partenaires intersectoriels, reconnaissance du savoir expérientiel et autonomisation des familles). Deuxièmement, les présentateurs résumeront les étapes des premières années de l'implantation progressive d'un service d'ergothérapie communautaire pour les enfants de 0 à 5 ans, incluant les barrières et facilitateurs rencontrés au cours de ce projet. Troisièmement, une séance d'échange sera animée par les présentateurs en utilisant les modalités technologiques disponibles (sondages, clavardage, sous-groupes de discussion, retour en plénière, complétion d'un document collaboratif) pour échanger sur les défis, facilitateurs, succès et pistes d'action concrètes pouvant être utilisés pour favoriser l'accès à des services d'ergothérapie, notamment auprès des familles vulnérables, dans une optique d'équité en santé. Implication pour la pratique : Cette discussion mettra en lumière le rôle de l'ergothérapie qui gagnerait à être développé davantage en surveillance, promotion et prévention auprès des enfants et leur famille. De plus, les pistes d'actions discutées pourraient être utilisées pour jouer notre rôle d'agent de changement dans la mise en place de services novateurs d'ergothérapie basée sur la surveillance, la prévention et la promotion de la santé. Conclusions : À la suite du congrès, les présentateurs feront parvenir une synthèse des discussions aux participants. De plus, une communauté de pratique pourrait être créée si les participants désirent continuer les échanges et partager leurs réflexions à ce sujet.

Key words | mots clés : *Community care, Interprofessional*

Monday 10:35-11:00
CSOS paper: Non-specific | Environment
Justice occupationnelle intergénérationnelle – l'apport d'une réflexion éthique

Marie-Josée Drolet Université du Québec à Trois-Rivières, Marjorie Désormeaux-Moreau Université de Sherbrooke, Sarah Thiébaut Samson Institut de formation continue de l'ADERE, Paris, France, Muriel Soubeyran Institut de Formation pédicure-podologie-ergothérapie de Rennes, France

Raison d'être : Liée aux impacts négatifs des occupations humaines sur les écosystèmes, la crise climatique contemporaine constitue la plus grande menace actuelle pour la santé humaine. Les choix occupationnels des êtres humains d'hier et d'aujourd'hui engendrent des injustices occupationnelles à l'égard des générations présentes et futures d'humains. Objectifs : L'objectif de cette communication est d'articuler une réflexion éthique sur la notion de justice occupationnelle intergénérationnelle, soit celle liée à la crise climatique contemporaine. Approche : Après avoir défini la notion de justice occupationnelle intergénérationnelle, cinq concepts occupationnels seront distingués, soit les : besoins, désirs, choix, droits et devoirs occupationnels, pour mieux comprendre les exigences éthiques de la valeur qu'est la justice occupationnelle intergénérationnelle. Conséquences pour la pratique : Cette réflexion éthique articule une perspective éco systémique qui élargit la compréhension usuelle de concepts occupationnels au fondement de la science de l'occupation et de l'ergothérapie pour y inclure la considération des interactions d'interdépendance entre tous les êtres vivants au-delà de la compréhension des seules interactions humaines. Elle ouvre des avenues nouvelles pour penser à la fois les rôles traditionnels et non traditionnels que l'ergothérapeute pourrait être amené à embrasser, s'il

prend au sérieux les exigences éthiques de la justice occupationnelle intergénérationnelle, en plus d'offrir un langage occupationnel commun pour réfléchir à ces rôles. Conclusions : Cette communication met de l'avant la posture de leader que pourrait jouer l'ergothérapeute dans les transitions occupationnelles qui seront requises en réponse à la crise climatique pour soutenir les transitions écologiques et justes.

Key words | mots clés : *Occupational justice, Occupational science*

Monday 10:35-11:25
Sponsored session: |
WFOT Session: On the QUEST for quality: WFOT's new quality evaluation strategy tool
Paulette Guitard, Samantha Shann, Andrew Freeman

What is 'quality' in the context of occupational therapy practice, research and education? How do you ensure you provide quality occupational therapy, despite pressures of demanding, resource-constrained environments? The purpose of this presentation is to present QUEST, the recently-launched WFOT resource, which provides a comprehensive strategy to measure quality and use data to demonstrate the value of occupational therapy. QUEST provides evidence and accountability of how occupational therapy advances health outcomes, enhances satisfaction and optimizes use of limited resources.

Key words | mots clés :

Monday 10:35-11:00
Poster defense: Adult | Mental health
Critically analyzing mental health practices for adults with developmental disabilities
Danielle Baumann University of Toronto, Megan de Cruz University of Toronto, Nicole Bobbette Centre for Addiction and Mental Health (CAMH), Jessica Rosales Centre for Addiction and Mental Health (CAMH), Elyse Goodfield Centre for Addiction and Mental Health (CAMH), Rona Macdonald University of Toronto, Yani Hamdani University of Toronto

Rationale: Nearly 1 in 2 adults with developmental disabilities (DD) also have a mental health diagnosis. Participating in meaningful occupations is fundamental to the well-being of this group. What constitutes meaningful occupation for adults labeled with DD is shaped by prevailing ideas about 'normal' development and adulthood. Yet, little is known about the potential consequences of these ideas, and the social values and assumptions underlying them, when they underpin mental health occupational therapy (OT) practice. Objectives: This study examined social values and assumptions underlying what constitutes meaningful occupation for adults with DD in OT practice, and the potential consequences for adults with DD and mental health concerns. Approach: Guided by a critical social science perspective and collaborative autoethnography approach, a team of OT students, clinicians and researchers participated in four virtual dialogues to analyze and interpret their collective perspectives on mental health OT practice for adults with DD. The dialogues were guided by a series of reflexive questions about DD and meaningful occupations. A reflexive thematic analysis of dialogue transcripts was conducted to identify concepts and assumptions underpinning this data. Practice implications: Prevailing normative assumptions about meaningful adult occupations (e.g., independent, productive) were embedded in and

structured OT knowledge and practice. This had beneficial consequences for some adults with DD, and potentially harmful unintended consequences for others. Conclusions: Critical analysis of assumptions underlying mental health OT practices can reveal opportunities to mitigate unintended harms and promote a broader array of occupational possibilities for adults with DD.

Key words | mots clés : *Mental health, Theory*

Monday 10:35-11:00
Poster defense: Non-specific | Health and well-being
Identifying Canadian financial programs for people with disabilities
Tamika Bazin University of Manitoba, Emma Brautigan University of Manitoba, Taryn Rampling University of Manitoba, Ellie Jack University of Manitoba, Lisa Engel University of Manitoba

Introduction: Finance and health are strongly associated. Adults living with disabilities experience more financial barriers, which jeopardizes their health and occupational engagement. Financial programs provide education and support to optimize financial well-being. The availability and accessibility of financial programs aimed at Canadians living with disabilities is unknown. Objectives: To identify, describe, and critically appraise financial programs with online information, that aim to enhance the financial capability and well-being of Canadians living with disabilities. Methods: This environmental scan used a scoping review approach and four search methods: structured Google Advanced search, snowball search, hand search, and expert consultation. Two independent reviewers completed screening, inclusion, and data extraction. Data extraction used a standardized and pilot-tested electronic form to capture program location, disability populations, and financial content. Online content readability and accessibility were critically appraised using standardized measures. Results: One-hundred and thirty-four programs were identified. Most provided governmental tax, savings, or funding information (e.g., n=39 Disability Tax Credit; n=28 Registered Disability Savings Plan. All programs that aimed at health-care practitioners (n=6) emphasized filling out government forms. Only 26 programs explicitly addressed accessibility. One-hundred and six programs included content at a college reading level, surpassing recommended levels for public information. Conclusions: Occupational therapists should consider client finances as foundational to health and occupational engagement. There are limited financial programs aimed at improving financial well-being for Canadians living with disabilities beyond accessing governmental benefits. There is a need for more holistic and comprehensive financial programs, as well as improvements to online content accessibility and readability.

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

Monday 10:35-11:00
Poster defense: Older Adult | Chronic conditions
GOTPD: Validation of a group OT program for Parkinson's Disease
Serafina Liotti University of British Columbia, Sarah Patrick University of British Columbia, Kathryn McKall Vancouver Coastal Health, Denise Kendrick Vancouver Coastal Health, Sue Forewell University of British Columbia

Introduction: Parkinson's disease (PD) greatly impacts ability to function in everyday life, in areas such as mobility, dressing, eating, social functioning, and employment. However, there is an unmet need in Canada for occupational therapy (OT) group protocols that are cost effective and support self-management and social inclusion for PD populations. Thus, a group program designed to address the occupational challenges of individuals with PD was developed in consultation with patient partners and clinicians. The series consists of four 90-minute sessions covering: Thinking Skills, Adaptive Aids and Assistive Technology, Living With Involuntary Movements, and Managing Day-to-Day Symptoms. Objective: To consult with clinicians to determine if the occupation-focused, educational group series content is relevant in supporting the daily functioning goals of individuals with PD. Methods: This project builds upon previous literature review, program development, and consultation with patient partners. It involves collecting input from eight clinicians with experience in movement disorders or PD to determine validity of the program content. Using a mixed-methods design, data collection is completed through semi-structured interviews and a survey. The interview data will be thematically analyzed, and descriptive statistics will be used to summarize survey results. Practice Implications: The validation of the occupation-focused group series from clinicians supports the next phase of testing and running the novel group intervention series with clients with PD. Conclusion: This study contributes to OT practice by validating the content of an occupation-focused and client-informed education series for people with PD.

Key words | mots clés : *Evidence-based practice, Parkinson's Disease*

Monday 10:35-11:00
Poster defense: Community/Population | Mental health
Evaluation of Open Minds: A mental illness anti-stigma initiative
Sumbal Afzaal University of Toronto, Benafscha (Myriam) Hamidi University of Toronto, Courtney Brennan The Centre for Addiction and Mental Health (CAMH) / University of Toronto, Behdin Nowrouzi-Kia University of Toronto, Yani Hamdani University of Toronto / The Centre for Addiction and Mental Health (CAMH)

Rationale: For people with mental illness, the judgement that is received from others, specifically from those without mental illness, has been reported as one of the most significant barriers to leading a fulfilling life (Canadian Mental Health Association, 2020). The literature suggests that a lack of partnership and an increased disconnect between individuals with and without a mental illness give rise to stigmatizing beliefs about mental illness. These beliefs can become barriers to seeking mental health services for people with mental illness (Stuart, 2016). Anti-stigma programs, such as Open Minds led by an occupational therapist at the Centre for Addiction and Mental Health, have been developed to reduce negative attitudes towards mental illness. Open Minds promotes collaboration and dialogue through shared occupations between people diagnosed with mental illness and corporate volunteers through contact-based education. However, the impact of shared occupations on stigmatic beliefs has not been thoroughly explored. Objectives: This study evaluated the impact of the Open Minds program on public-stigma and self-stigma beliefs. Methods: A sequential mixed methods design was employed, with quantitative measures followed by qualitative measures through pretest and post-test surveys. Practice Implications: Open Minds reduced stigmatizing beliefs of both people with mental illness and corporate volunteers. The findings can inform evidenced-based anti-stigma educational workshops and

interventions as well as reduce barriers to accessing mental health services related to stigma. Conclusion: This study provides insights into addressing mental illness stigma by promoting greater community engagement between people with and without a mental illness.

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

Monday 11:30-11:55
CSOS paper: Adult | Environment
Special Olympics Journeys: Athletes' Narratives of Sport Occupations and Belonging
Rebecca Renwick University of Toronto, Denise DuBois University of Toronto, Roxy O"Rourke University of Toronto, Kelly Arbour-Nicitopoulos University of Toronto, James Noronha Special Olympics Ontario

Introduction: Previous research highlights belonging as a fruitful construct for understanding inclusion in community life for young adults with intellectual/developmental disabilities (IDD). Belonging has been linked to participation in organized sport occupations (OSO) for young adults with IDD. Yet, pathways to belonging (i.e., finding belonging) through OSO from their own perspectives remain unclear. Understanding their experienced belonging pathways would help inform research, policy, and programming and reveal relevant roles for occupational therapists with this group of young adults. Objectives: This narrative inquiry research aimed to illuminate complex pathways to belonging through participation in OSO in Special Olympics Ontario (SOO) contexts from the perspectives of young adult SOO athletes with IDD. Methods: Narrative interviews with 20 athletes (18-35 years) with IDD involved in SOO centred on their stories (narratives) of participation in OSO (e.g., sport-related competitions, events, team practices) and belonging (or not) before/during their journey through SOO. Based on their interviews, narrative summaries were co-created for each athlete and thematically analyzed to reveal key common conceptual themes related to belonging pathways through OSO across athletes' stories.Results: Key themes illuminating links between OSO participation and pathways (i.e., complex processes) leading to belonging (or not) will be presented and supported by verbatim quotes and examples from the athletes' narratives. Conclusions: Results: (a) highlight how OSO can contribute (or not) to the pathways for finding belonging; (b) guide future research and development of policy/programs aimed at supporting belonging through OSO; and (c) reveal roles for occupational therapists with this group of young adults.

Key words | mots clés : *Community development, Occupational science*

Monday 11:30-12:30
Sponsored session: |
ACOTRO sponsored session: "I think you are on mute…."
Andrea Bowden, Heather Cutcliffe, Julie Entwistle & Kevin Wong

Occupational therapists have used various types of technology - also known as virtual care, telehealth, or telerehabilitation - to provide remote support and services long before we found ourselves saying, "I think you are on mute." The global pandemic has driven many occupational therapists to quickly introduce or increase their use of telepractice to continue the safe delivery of occupational therapy services. This rapid uptake has caused occupational therapists to seek clarity on questions such as:

When is it appropriate to offer services via telepractice? How do I ensure the privacy and security of my client's information? Where do I need to be registered to provide these services? What factors should I consider when choosing a telepractice platform? What should my clients know about receiving services via telepractice? Across the country, occupational therapy regulators worked collaboratively to clarify these questions and took meaningful steps to ensure the public receives competent, safe and ethical care. Join this session to learn more about these practice considerations and hear how regulators responded during this challenging time.

Key words | mots clés :

Monday 11:30-11:55
Paper presentation: Adult | Mental health
Workplace mental health strategies in public safety organizations: A review
Megan Edgelow Queen's University, Matthew McPherson, Sonam Mehta, Aquila Ortlieb, Emma Scholefield

Introduction: Public safety personnel, including firefighters, paramedics, and police officers, are frequently exposed to psychological trauma in the course of their daily work. While the importance of attending to public safety personnel mental health has been established, the implementation of workplace mental health strategies by public safety organizations is not well understood. Objectives: This scoping review maps the implementation of workplace mental health strategies in public safety organizations, identifying the characteristics, participants, contexts, and results of these efforts. Methods: English language primary studies with any publication date until July 2020 were considered. JBI methodology and the Preferred Reporting Items for Systematic Reviews extension for Scoping Reviews was followed. The search was carried out in MEDLINE, Embase, PsycInfo, CINAHL, and Web of Science to ensure a broad search. Duplicates were removed, and two independent reviewers screened the titles, abstracts, and full-text of the selected studies. Reference lists of relevant papers were reviewed for additional primary studies. Data collection was performed with a tool developed by the researchers, based on JBI's model instrument for extracting study details, characteristics, and results. Results: 43, 884 records were retrieved, after screening, 89 primary studies remained for analysis. This analysis is ongoing and will be complete by the Spring of 2021. Conclusions: The results of this review will inform workplace mental health implementation in public safety organizations. The review will map the breadth of strategies currently in use, as well as the contexts they are being used in, and inform occupational therapy practice with public safety employers.

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

Monday 11:30-11:55
Poster defense: Child | Early childhood
A nipple monitoring device to evaluate oral feeding in infants
Sandra Fucile Queen's University, Kimberly Dow Queen's University

Introduction: Competent bottle or breast feeding is a key milestone that all infants in the neonatal intensive care unit (NICU) must achieve to be discharged home. Current practices of oral feeding

assessment are based on clinical observation of infants' sucking, swallowing and breathing ability. These observations are subjective and provide poor evidence on the etiology of the oral feeding difficulty. There is a lack of objective methods to assess infants' oral feeding skills. Objective: To develop a nipple monitoring device to assess bottle/breast feeding skills in infants. Method: A nipple monitoring device was designed to evaluate sucking, swallowing, and breathing. This bedside tool allows parents/nurses to feed their baby in their customary manner. To measure sucking a tube was inserted through the tip of the nipple/shield. To monitor swallow an electrode was placed besides the hyoid bone. To monitor breathing a pressure pad was placed on the abdomen. Sucking, swallowing, and breathing activities were monitored directly on the computer screen providing direct feedback to the researcher. Oral feed duration, percent volume intake, and adverse events (episode of apnea/bradycardia/oxygen desaturations/crying/suck refusal) were compared to an oral feeding with and without the nipple monitoring device to ensure its efficacy and safety. Results: Seventeen infants participated in the study. There was no difference in oral feeding duration, volume intake and adverse events between the two oral feeds. Conclusion: Results indicate that the nipple monitoring device is a safe tool that can be used by clinicians to quantitatively evaluate oral feeding skills in infants.

Key words | mots clés : *Dysphagia, Evaluation*

Monday 11:30-12:30
Extended discussion: Community/Population | Mental health
"Doing to get by": Understanding Boredom During and Following Homelessness
Carrie Anne Marshall Western University, Rebecca Gewurtz McMaster University, Laurence Roy McGill University, Skye Barbic University of British Columbia, Cooke Abrial Western University, Jordana Bengall Western University, Julia Holmes McMaster University, Suliman Aryobi Western University, Rosemary Lysaght Queen's University, Bonnie Kirsh University of Toronto

Introduction: Individuals with lived experiences of homelessness (ILEH) identify boredom as a common experience, yet few studies have explored how boredom is experienced across the trajectory of homeless to housed. Objectives: To present the findings of a multi-site study exploring the issue of boredom among ILEH and use these findings to engage occupational therapists in a dialogue about the role of the profession in addressing this issue. Session Description: We will begin by presenting the findings of a mixed methods study including three groups recruited from Kingston, London, Hamilton and Montreal: 1) Persons living sheltered and unsheltered; 2) Persons housed following homelessness; and 3) Service providers supporting ILEH. Groups 1 and 2 included 163 participants who were engaged in quantitative interviews including seven standardized measures of boredom, engagement in meaningful activity, hopelessness, mental well-being, substance use, and community integration. From these groups, we engaged 35 participants in in-depth, semi-structured interviews. Group 3 included 20 participants who were engaged in in-depth, semi-structured interviews only. Qualitative data from all groups were analyzed using Thematic Analysis (Braun & Clarke, 2015). When we analyzed our data, there were no statistically significant differences between unhoused (Group 1) and housed (Group 2) participants on any of the standardized measures. Participants in Groups 1 and 2 described boredom as imposing a serious and negative influence on psychosocial well-being and identified this as the result of having little autonomy in how they spent their time. Group 3 participants described being stuck in an institutional context that determined how the time of ILEH was spent. Following the presentation of

these findings, we will engage attendees in discussion-based activities aimed at identifying approaches that could be used by occupational therapists to overcome barriers to occupational engagement for ILEH. Practice Implications: Occupational therapists have a unique perspective and skills to address the issue of boredom among ILEH. Conclusions: Few studies have explored the experience and influence of boredom on the psychosocial well-being of individuals during and following homelessness. Occupational therapists have unique skills that can support ILEH to engage in meaningful activity in the face of environmental constraints.

Key words | mots clés : *Mental health, Occupational justice*

Monday 11:30-11:55
Paper presentation: Non-specific | General/Professional issues/Practice
Intentionally collaborative relationships: stories, disruption, and partnerships
Laura MacGregor Martin Luther University College, Elizabeth Pooley

Introduction: As the mother of a profoundly disabled child, as well as a qualitative researcher, the first author has thought deeply about relationships with health care professionals. Within her phenomenological research, mothers shared numerous instances of having their expertise ignored resulting in adverse outcomes for their children. Creating change involves both disrupting the client-centered relationship, as well as ongoing work towards establishing trust filled partnerships that value diverse wisdom. Objectives: This presentation will challenge occupational therapists to reflect on power differentials within relationships and critically examine "ways of knowing" in order to co-construct intentionally collaborative relationships in occupational therapy settings. Approach: Drawing upon the lived experience we examine forces that maintain power imbalances in parent-therapist relationships, including language, experiential knowledge, and power structures. The authors will propose opportunities to disrupt the status quo, celebrate existing intentionally collaborative relationships, and re-imagine a profession fully supported to create and maintain such relationships. Practice Implications: Occupational therapists began using the term client-centred over 40 years ago. This session will reflect on the evolution of our understanding of client-centred practice and consider how intentionally collaborative relationships both disrupt problematic power differentials and offer the potential to improve therapeutic outcomes. Conclusions: Disruption is a hopeful construct, representing a willingness to critically examine beliefs, theories, and practice. This session will challenge therapists to consider hierarchical power relations built into therapy and the power-laden ordering of knowledge, with the goal of building and maintaining intentionally collaborative relationships.

Key words | mots clés : *Occupational justice, Theory*

Monday 12:05-12:30
Poster defense: Non-specific | Environment
Environmental enrichment effects on inpatient stroke recovery: A scoping review
Jenna Bajus University of Toronto, Samson Yeung University of Toronto, Nina Hovanec University Health Network, Shehroz S. Khan KITE- University Health Network

Rationale: An enriched environment (EE) is one that encourages socialization, exercise, sensory and cognitive stimulation, and task-specific therapy. These in turn may promote neuroplasticity and improve rehabilitation outcomes in stroke patients. Rosbergen et al.'s (2017) preliminary research found that hospital patients exposed to EE through communal activity spaces were more physically active and less likely to experience adverse events including falls and death. With advancements in technology, there are increasing opportunities to implement EE as an intervention to promote therapeutic activity beyond the confines of therapy sessions. Therefore, there is a need to synthesize the findings from current literature in order to determine the variety of implementation of EE. Objective: This has led to the following research question: what technology-based environmental enrichments affect stroke patient outcomes in inpatient settings? Methods: To answer this question, a scoping review will be conducted using five databases: Medline, Scopus, CINAHL, Cochrane, and Embase. Research articles that describe different types of electronic environmental enrichments such as computers, video games, and smart watches within inpatient stroke rehabilitation settings will be reviewed. Interventions that require constant involvement of a therapist will not be included as they will be considered therapy enrichment and not EE. Practice implications: Findings will inform whether EE can improve rehabilitation outcomes. It may also provide ideas for clinicians on how to increase patient's engagement and motivation to perform rehabilitative activities. Conclusion: There are a variety of possible EE interventions, however further research is needed to measure its impact on functional outcomes.

Key words | mots clés : *Stroke, Technology*

Monday 12:05-12:30
Poster defense: Adult | Chronic conditions
Implementation of a Cognitive Orthosis for Cooking for individuals with traumatic brain injury: The therapists' perspective
Sareh Zarshenas University of Montreal, Melanie Couture, Nathalie Bier, Deirdre Dawson, Emily Nalder, Sylvain Giroux, Carolina Bottari

Introduction: Chronic cognitive impairments following moderate to severe traumatic brain injury (TBI) have devastating effects on the performance of daily living activities such as meal preparation. Over the last 10 years, our team has been working to develop a Cognitive Orthosis for CoOking (COOK) for this population. Health care providers play a significant role in training individuals to employ assistive technologies and their perspectives would be extremely valuable in the successful implementation of COOK within a living or clinical context. Objectives: To explore the care providers' perspectives on benefits, barriers, and facilitators to the implementation of COOK for adults with TBI within clinical contexts and home. Methods: Using a qualitative descriptive approach, semi-structured individual interviews and focus groups were carried out with experienced care providers of adults with TBI (n=30) in Ontario-Canada. Qualitative analysis based on the Miles et al approach was used. Results: According to the participants, COOK could potentially be used with individuals with cognitive impairments to increase safety and independence in meal preparation and support healthcare providers. However, limited access to funding, clients' lack of motivation/knowledge, and the severity of their cognitive and motor impairments were perceived as potential barriers. Facilitators to the use of COOK include training sessions, availability of private/provincial financing, and comprehensive assessments by a clinical team prior to use. Conclusions: Health care providers' perspectives will help develop implementation

strategies to facilitate the adoption of COOK within homes and clinical contexts for individuals with TBI and improve the next version of this technology.

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

Monday 12:05-12:30
Poster defense: Child | Health and well-being
Examining occupational therapy in school-based adolescent mental health: A review
Kristan d'Entremont, Parisa Ghanouni

Introduction: Adolescence is a time of change, during which mental health issues may arise, leading to decreased function and impaired occupational performance. Despite the importance of occupational therapists (OTs) to work on adolescent mental health in school settings, it is still unclear what roles they fill and what potential they have for helping adolescents. Objectives: This narrative review examines the potential role of school-based OTs for adolescent mental health. Methods: 4 databases were searched (PubMed, CINAHL, ERIC, PsycINFO) using search terms including occupational therap*, school health services, high school, adolescen*, and mental health. 869 sources were identified and screened for inclusion and exclusion criteria, yielding 11 sources for appraisal. All were appraised using the McMaster form. Results: Studies show that school-based health centers have a positive effect on adolescent functioning. An OT may help with participation in important school activities by playing a role in early identification, intervention and symptom management for mental health. The literature also identifies a role in post-secondary transition planning and shared decision making. Conclusion: OTs may be an asset to school-based mental health teams. Having an OT to increase mental health services in schools can contribute to reducing stigma and lead to healthier, better functioning adolescents. Additional research may be required regarding the treatments offered in school-based mental health and the unique perspective that OT can provide in helping students.

Key words | mots clés : *Mental health, School health*

Monday 12:05-12:30
Paper presentation: Adult | Mental health
Coping strategy training using Kolb's Adult Learning Model: Effectiveness assessment
Émilie Isabelle Cousineau CISSSO, Paulette Guitard Université d'Ottawa, Theresa Straathof The Ottawa Hospital

Introduction. Two occupational therapists developed 30 coping strategies modules for Acute Mental Health based on Kolb's Adult Learning Model1. Although the modules were developed from evidence-based principles, there is no evidence that the Adult Learning Model is effective to teach coping strategies to promote occupation in daily life post-discharge. Objectives. To determine the effectiveness of the modules to help clients achieve their occupational goals and to determine the transferability of the learned skills to daily life upon discharge. Methods. A pretest-post-test quasi-experimental design without a control group was conducted. Two measures were used: the Canadian Occupational Performance Measure (COPM) and a semi-structured interview to better understand participants' reality post-discharge. Quantitative (COPM) and qualitative (interviews) measures were completed pre-

post intervention (T1-T2) and at three -month post-discharge (T3). Results. Twenty-nine inpatients participated. Sixteen completed both COPM and interviews while 13 completed COPM only. Paired t-tests demonstrated the effectiveness of coping strategies training using the Adult Learning Model as participants scores significantly improved between admission (T1) and discharge (T2) (p-value <0.05). Although the COPM scores are slightly lower at T3 than T2, the difference is not statistically significant (p-value <0.05) suggesting stability of scores over time. During the interviews, participants reported appreciation for the coping strategies/skills learned. However, the application of strategies in daily life situations was deemed challenging and several barriers were identified. Conclusions. Results suggest that the modules are effective to promote occupational engagement. As the application of coping strategies in daily life situations remains challenging, post-discharge follow-ups should be considered.

Key words | mots clés : *Acute care, Mental health*

Monday 1:30-1:55
Poster defense: Child | Health and well-being
Transitioning to oral feeding: Effectiveness of a hunger-based tube-weaning program
Anna Willms University of British Columbia, Heather Cowie University of British Columbia, Rochelle Stokes BC Children's Hospital, Jill Zwicker University of British Columbia

Introduction: Tube-feeding may be necessary when a child is unable to eat sufficiently by mouth; however, it is associated with medical, developmental, and socio-emotional complications and can disrupt other occupations, such as play and family mealtime. Some children remain dependent on tube-feeding even when no longer medically needed. Occupational therapy has played a key role in developing and delivering an interdisciplinary program at a tertiary care hospital to support children who have difficulty transitioning to oral feeding using traditional weaning methods. Objective: To determine if participating in a 2-week, outpatient, hunger-based tube-weaning program leads to decreased dependency on tube feeds, and to investigate whether age is associated with outcome. Methods: This retrospective cohort study includes 40 children with feeding tube dependency who have participated in the program and are included in an existing database. Data are collected pre- and post-intervention and at 6- and 12-month follow-up visits. Linear mixed-model analyses will be used to determine the effectiveness of the program, adjusted for multiple comparisons. Results: We hypothesize that children will have: (1) a significant decrease in percentage of caloric intake via tube feeds; (2) a significant increase in the number of foods eaten; and (3) no greater than 10% change in body weight Z-score throughout the program. We anticipate that younger age at the start of weaning will be associated with more favourable outcomes. Conclusions: This study will determine the success of this intensive, interdisciplinary tube-weaning program and may inform clinical practice in other feeding programs across the country.

Key words | mots clés : *Evaluation, Interprofessional*

Monday 1:30-2:30
Extended discussion: Non-specific | General/Professional issues/Practice
Challenging 'Challenging Behavior'

Rona Macdonald University of Toronto; Dept of OS & OT, Christie Welch University of Toronto, Dept of OS & OT, Emily Nalder University of Toronto, Dept of OS & OT

Introduction: Challenging behaviors (CB), otherwise known as reactive or responsive behaviors, are a common and demanding aspect of OT practice with disparate client groups (e.g., for people living with traumatic brain injury (TBI), autism, or dementia). Although practice contexts for each group may differ, new OT research from the practice fields of TBI and autism studies, calls into question the established literature, and traditional assumptions and ways of viewing and responding to CB. Objectives: To invite OT's working with different client groups to be collectively reflexive about their practice, to critically engage with and reflect on key findings from new research on CB, and to discuss possible implications for practice. Session description: The session will have two parts. Part one will be two ten-minute audio-visual presentations, highlighting key research insights and what aspects of practice those insights call into question. Part two, the remainder of the session, will involve three (or more) facilitated small group break-out sessions. The break-out sessions will begin with a five-minute structured self-reflective written exercise about a CB practice experience, followed by a discussion about how the new research findings might suggest alternative and additional ways of thinking about CB. We will use a whiteboard to capture key points from the discussion from each group. A written summary will be emailed to interested attendees after the session. Practice implications: By bringing together OT's from different practice arenas to discuss new research on challenging behaviors, therapists will have the opportunity to learn and engage with new ways of thinking about CB, to exchange experiences and make connections with OT's across health sectors, and to explore possible creative alternative ways of addressing behaviors that challenge OT's in practice. Conclusions: Challenging, reactive, or responsive behaviors can be an especially testing and potentially stressful aspect of OT practice at any time. We anticipate that the ongoing restrictions placed on individuals from different client groups as a consequence of COVID-19 could make professional development pertaining to CB especially apt and timely.

Key words | mots clés : *Autism, Brain injury*

Monday 1:30-3:25
Hands-on learning session: Non-specific | Occupational therapy education
The road to harm is paved with good intentions
Marie-Lyne Grenier McGill University, Heather Lambert McGill University

Introduction: Building a more just society will require greater attention to 'studying up'; that is, studying those of us who shape attitudes and control institutional structures that can create marginalization. Objectives: The main objective of this hands-on workshop is to illustrate and invite critical reflection on the use of ableist disability discourses in occupational therapy education, particularly in patient-case formulations, which are frequently used as a teaching tool in healthcare education. Session Description: This hands-on workshop will begin with a 35-minute presentation introducing key models/theories of disability, as well as key concepts related to ableist discourses. Presenters will also illustrate some of the key ways that ableism presents itself in occupational therapy education, which have the potential to contribute to harmful healthcare practices. The initial presentation will be followed by a 40-minute hands-on workshop (small group work), where participants will have the opportunity to practice applying learned concepts and a 15-minute Q&A session. Practice Implications: Occupational therapy

education helps to shape the way students think about disability and interact with disabled individuals, yet some current pedagogical practices can reinforce oppressive disability discourses. These have the potential to lead to harm and oppression when students enter practice. It is important that, as occupational therapy educators (university faculty, fieldwork educators, mentors, etc.), we reflect on and change our pedagogical practices toward disability-affirmative ones. Conclusions: During this hands-on workshop, participants will learn to challenge the ongoing use of pedagogical strategies that support oppressive disability discourses and apply ones that support identity-affirming disability discourses.

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

Monday 1:30-1:55
Paper presentation: Adult | Mental health
Effectiveness of Employment Interventions for Homeless Persons: A Systematic Review
Carrie Anne Marshall Western University, Leonie Boland University of Plymouth, Lee Ann Westover Columbia University, Rebecca Gewurtz McMaster University, Jordana Bengall Western University, Adam Amir Western University, Roxanne Isard Western University

Introduction: Individuals with lived experiences of homelessness (ILEH) express the desire to be employed, yet few achieve this outcome. Little is known about the range and effectiveness of employment interventions for this population. Objectives: To synthesize experimental studies evaluating the effectiveness of employment-based interventions on psychosocial outcomes for ILEH. Methods: We conducted a systematic review of effectiveness studies using Joanna Briggs Institute (JBI) and PRISMA guidelines. We searched seven databases in August 2019. Using Covidence, two independent raters screen titles and abstracts and conducted a full-text review. Studies were included or excluded based on a set of predetermined criteria established collaboratively among our team. Results: 11, 493 titles and abstracts were screened following the removal of duplicates. Of these, 70 were included in a full-text review. A total of 13 articles were included in a narrative synthesis. Interventions described in existing literature included: supported employment including social enterprise (SE) and individual placement and support (IPS) (n=5); combined substance use and vocational supports (n=4); integrated services that included an employment component (n=1); and vocational skills combined with cognitive behavioural therapy (n=1). Employment (i.e. days worked and security of employment) was the most commonly measured outcome in included studies (n=9) followed by: housing tenure (n=6); substance use (n=5), mental health (n=3), and community integration (n=1). Interventions demonstrated a low to moderate degree of effectiveness on employment outcomes. Conclusions: Few experimental studies have evaluated the effectiveness of employment-based interventions for ILEH. Occupational therapists are uniquely positioned to conduct future research in this area.

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

Monday 1:30-1:55
Paper presentation: Child | Primary care/Primary healthcare/Population health
Implantation d'un service d'ergothérapie communautaire pour les enfants de 0 à 5 ans

Audrée Jeanne Beaudoin Institut universitaire de première ligne en santé et services sociaux (CIUSSS de l'Estrie - CHUS), Marilyn Gagnon Institut universitaire de première ligne en santé et services sociaux (CIUSSS de l'Estrie - CHUS), Julie Ouellette CIUSSS de l'Estrie - CHUS

Introduction : Moins de 5% des ergothérapeutes en première ligne offrent régulièrement des services pédiatriques (Cotellesso et al., 2009). Ces services sont donc peu accessibles et peu développés en communauté. La surveillance, la prévention et la promotion du développement des enfants gagneraient à être développés. Objectifs : Évaluer la mise en place de services d'ergothérapie communautaire dans une optique de surveillance, prévention et promotion du développement des enfants de 0 à 5 ans. Méthodes : Une approche de recherche-action participative avec un devis mixte a permis de co-développer et implanter le service d'ergothérapie communautaire avec les partenaires intersectoriels. Les éléments contextuels influençant l'implantation du service et la satisfaction des partenaires face aux services reçus ont été évalués. Résultats : Le service d'ergothérapie communautaire est basé sur une approche par paliers afin d'offrir des services dans un contexte d'universalisme proportionné. Au cours de l'année pilote, 7 ateliers de sensibilisation (palier 1; n=27 parents et 49 intervenants), 92 consultations auprès des intervenants dans les milieux de garde et organismes communautaires (palier 2; n=397 enfants rejoints) et 23 suivis individuels (palier 3) ont été offerts par l'ergothérapeute. Conclusions : À la suite du projet pilote, l'offre de services en ergothérapie communautaire auprès de la clientèle jeunesse a été bonifiée, pérennisée et déployée à plus grand échelle. De plus, le projet a permis de promouvoir l'expertise des ergothérapeutes dans les services de première ligne pour les enfants, encore très peu développés.

Key words | mots clés : *Community care, Interprofessional*

Monday 1:30-1:55
Poster defense: Community/Population | Occupational therapy education
Understanding autistic burnout, inertia, meltdowns and shutdowns to inform occupational participation and engagement
Keshini Namasivayam University of Toronto, Jasmine Phung* University of Toronto, Christie Welch Bloorview Research Institute, Melanie Penner Bloorview Research Institute

Rationale: Existing research suggests that autistic individuals face arousal regulation difficulties, however, much of the literature has failed to understand these challenges from a first-hand perspective. Recently, Welch and colleagues (2020) have unveiled four terms utilized by autistic informants to describe manifestations of arousal regulation challenges: "Burnout", "Inertia", "Meltdowns" and "Shutdown" (BIMS). This current study aims to extend the aforementioned description of BIMS and explore how barriers arise in daily occupations. Objectives: This study aims to re-theorize arousal regulation through the perspectives of autistic informants. Understanding BIMS will then be related to its impact towards occupational participation and engagement. Methods: Using a qualitative co-design approach, autistic adults, parents of autistic children/youth and autistic children/youth will share their experiences with BIMS through focus groups, online chatroom and a digital collage exercise, respectively. A thematic analysis will be conducted to retheorize existing definitions of arousal regulation to better understand occupational participation/engagement barriers that arise from BIMS. Practice implications: Results will provide a foundation for further study on how to better support

occupational participation and engagement. A deepened understanding of BIMS will inform future research aimed at creating a BIMS self-management tool. Finally, utilizing informant-driven methodology leverages the experiential knowledge of autistic people, to produce research that better meets their needs. Conclusions: Understanding the first-hand accounts of BIMS is crucial to re-theorizing the arousal regulation phenomenon. This will generate foundational knowledge for understanding the implications towards occupational participation/engagement for autistic individuals.

Key words | mots clés : *Autism, Theory*

Monday 1:30-1:55
Poster defense: Older Adult | Chronic conditions
Gestion de la douleur chronique des aînés: état des connaissances
Marie-Ève Lapointe, Jacqueline Rousseau, Julie Masse, Johanne Higgins, Carolann Shea, Pierre Rainville, David Lussier, François Dubé, François Desmeules, Johanne Filiatrault

Introduction: Jusqu'à 50 % des aînés vivant à domicile déclarent présenter de la douleur chronique interférant avec leur fonctionnement quotidien. Il est donc crucial de pouvoir outiller les aînés qui en sont affectés d'une gamme de stratégies pour mieux gérer la douleur au quotidien. Bien que plusieurs études aient été menées sur divers programmes interdisciplinaires d'autogestion de la douleur chez les adultes, peu d'efforts de synthèse des connaissances ont été réalisés quant aux programmes spécifiquement dédiés aux aînés. Objectif: Dresser un portrait des connaissances actuelles sur les programmes interdisciplinaires d'autogestion de la douleur chronique offerts aux aînés. Méthodes: Un examen de la portée a été réalisé en suivant les étapes préconisées par Arksey et O'Malley (2005). Des recherches par mots-clés ont été effectuées dans MEDLINE, CINAHL, EMBASE et Cochrane Library afin d'identifier les études pertinentes. Tous les types de devis ont été considérés. Résultats: Soixante-neuf articles ont été inclus dans cette recension. Parmi ces études, seulement 4 % incluaient uniquement des aînés dans leur échantillon et plus de 60% ont eu recours à un devis pré-expérimental. L'analyse montre que la majorité des programmes étudiés étaient fondés sur une approche cognitivo-comportementale de groupe et utilisaient une combinaison de modalités, dont l'éducation et l'entraînement aux stratégies d'autogestion. Plusieurs bienfaits des programmes sont rapportés en lien avec l'intensité de la douleur, l'autonomie, la santé mentale et la qualité de vie. Conclusions: Les programmes interdisciplinaires d'autogestion de la douleur chronique s'avèrent prometteurs pour guider l'intervention clinique auprès des aînés présentant de la douleur chronique.

Key words | mots clés : *Community care, Interprofessional*

Monday 2:05-4:00
Professional issue forum: |
Professional issue forum: Sexuality from an occupational perspective: Then, now and tomorrow
Louis-Pierre Auger, Paulette Guitard, Shaniff Esmail, Moderator: Michelle Leclerc

Sexuality is a continuously evolving concept throughout the course of a person's life. While Occupational Therapists are proficient in enabling meaningful, intimate occupations, the area of sexuality continues to be largely overlooked in rehabilitation. Many barriers influence the inclusion of sexuality in occupational

therapy practice or research, , resulting in few opportunities for users to address sexuality in occupational therapy, which can lead to reduced sexual functioning and overall quality of life of the users.

This Professional Issue Forum (PIF) will explore barriers faced by Canadian Occupational Therapists in addressing sexuality, through education, research, and clinical practice perspectives, and build OTs capacities to address and advocate for users needs.

This PIF aims to:

  Raise awareness on the contribution of occupational therapists in sexual rehabilitation and discuss concrete ways to include it in daily practice;

  Obtain a better understanding of the barriers that affect practices by occupational therapists; and

  Exchange ways to support clinicians in addressing sexuality in their daily practice.

Panelists:

Louis-Pierre Auger, MOT, MSc, doctoral student in rehabilitation sciences at Université de Montréal

Paulette Guitard, PhD, Full professor, Occupational Therapy Program, Université d'Ottawa

Shaniff Esmail, PhD, Associate Chair, Faculty of Rehabilitation - Occupational Therapy, University of Alberta.

Moderator: Michelle Leclerc

Key words | mots clés :

Monday 2:05-2:30

Poster defense: Older Adult | Advocacy /Change agent

Improvements to targeted care provision for older adults facing homelessness

Tiffany Igros University of Toronto, Layana Kirubainathan University of Toronto, Amie Tsang Canadian Mental Health Association Toronto (CMHA), Emily Nalder University of Toronto, Rona Macdonald University of Toronto, Luba Senkiw Ryerson University

Introduction: Older adults (OA) facing homelessness require targeted care from health and social service providers due to complex mental and physical health needs, experiences of intersecting inequalities, and structural barriers that imposes difficulty navigating services. Despite this knowledge, programs and services that specifically address this population are lacking in the City of Toronto (Barken et al., 2015). As system advocates and members of interdisciplinary teams, Occupational Therapists (OTs) are uniquely positioned to collect experiences from service providers to understand the factors that influence the ability to provide targeted care. Objectives: This study aims to explore the experiences of health and social service providers who work with OA experiencing homelessness and better understand the factors and processes that influence their ability to provide targeted care services. Methods: The study will implement an interpretive descriptive approach (Thorne, 2016). Researchers will conduct semi-structured interviews with 10 health and social service providers, including OTs, who work in programs/organizations that directly serve OA experiencing homelessness. Interview data will be analyzed using thematic analysis and description. Practice Implications: Findings aims to increase current understandings of Toronto's homelessness service delivery system and the factors that shape how providers work with OA experiencing homelessness. There is opportunity for this study to serve as a basis for exploring the role that Occupational Therapists can play in advocating for older adults experiencing homelessness. Conclusions: This study aims to analyze the experiences of service providers

to identify opportunities for OTs to advocate for improved service delivery for OAs experiencing homelessness.

Key words | mots clés : *Advocacy, Interprofessional*

Monday 2:05-2:30
Poster defense: Non-specific | General/Professional issues/Practice
Interprofessional collaboration in a multi-sector team
Anoli Shah University of Toronto, Wentao Li University of Toronto, Will Thomas-Boaz, Steffanye Michaelson, Isabella Cheng, Sander Hitzig

Introduction: A new multi-sector program was developed between community- and hospital-based services within the emergency department (ED) of a major urban trauma hospital to help reduce occupancy pressures by diverting admissions at their point of entry into the hospital, the ED. The resulting benefit is a reduction in the number of admitted patients by better linking them to community services. This multi-sector team uses an interprofessional collaboration (IPC) approach and includes four occupational therapists (OTs), along with other allied health professionals and external service provider organizations. IPC is a distinctive feature of and a strong prerequisite to the success of teams; however, there is limited knowledge of the team processes and dynamics involved in IPC as it relates to this team. Objective: The present qualitative study aims to explore the perspectives of the multi-sector team in the ED and community partners to identify key IPC strategies related to its implementation. Methods: An interpretive descriptive approach will be used to collect data through semi-structured interviews or focus groups with multi-sector team members and community partners. Thematic analysis will be used to examine the data. Practice implications: The multi-sector team members, including the OTs, may gain insight into their own performance and how it impacts team functioning. These findings will inform IPC practices relevant to other multi-sector healthcare teams. Conclusions: The experiences of working together across sectors in the ED setting may be of interest to other healthcare settings wanting to undertake similar IPC initiatives.

Key words | mots clés : *Acute care, Interprofessional*

Monday 2:05-2:30
Poster defense: Child | Health and well-being
How developmental coordination disorder affects daily life: The adolescent perspective
Natalie Stewart University of British Columbia, Fouziah Khairati University of British Columbia, Jill Zwicker University of British Columbia

Introduction: Despite considerable research on the impact of developmental coordination disorder (DCD) in childhood, far less work has focused on the implications of this disorder in the teen years. As DCD persists throughout the lifespan in the majority of cases, it is imperative for occupational therapists to understand the unique needs and challenges of adolescents with DCD to inform clinical care. Objectives: This study addresses the question: "In adolescents with DCD, what are their perspectives about how DCD affects their daily life?" Methods: We will conduct semi-structured interviews of 20 adolescents with DCD. Participants will be recruited from a database of children/adolescents who were

formally assessed and diagnosed with DCD from 2014 to 2020. We have identified 80 eligible participants in the database who are now aged 13-19 years; recruitment and data collection are underway. Interviews will be conducted over Zoom, audio-recorded, transcribed verbatim, and analyzed thematically using an interpretive description approach. Results: We anticipate that this study will: (1) describe the daily life experience of adolescents with DCD; (2) highlight if and how DCD currently impacts their physical, psychological, and emotional well-being; and (3) identify needs, strategies, and supports to manage DCD from the adolescents' perspective. Conclusions: Treatment for children with DCD is not standard of care, with even fewer services for adolescents. Insights gained from this study will provide client-centred evidence to advocate for occupational therapy intervention for adolescents with DCD, and guide recommendations for clinical care and community supports to meet the needs of this under-served population.

Key words | mots clés : *Developmental coordination disorder, School health*

Monday 2:05-2:30
Paper presentation: Not applicable | General/Professional issues/Practice
Utilization of a community of practice for occupational therapy leaders
Stephanie Au University of Toronto, Zili Xie University of Toronto, Siobhan Donaghy University of Toronto, Donna Barker University of Toronto

Introduction: Communities of Practice (CoPs) are "groups of people who share a concern, a set of problems, or a passion about a topic, and who deepen their knowledge and expertise in this area by interacting on an ongoing basis" (Wenger, McDermott, & Snyder. 2002). The Greater Toronto Area Occupational Therapy Professional Practice Leaders Network (GTAOTPPLN), is a CoP that utilizes group email queries and quarterly meetings to discuss issues and share knowledge and resources related to occupational therapy practice. Their communication records are saved in an online database. Objectives: The objective of this study was to identify professional practice issues from GTAOTPPLN topics of shared interest. Methods: This qualitative case study utilized thematic analysis on text files of 19 meeting minutes and 46 email queries from the GTAOTPPLN database archived between January 2014 and December 2019. Results: Practice issues emerged in six themes: 1) System level impact on practice and care; 2) Organizational level impact on practice and care; 3) Staffing issues; 4) Stakeholder relationships; 5) Advancement of occupational therapy as a profession; and 6) Advocacy. Conclusion: This study represents the first attempt to investigate the value of a Canadian OT CoP through analysis of its communication records. The findings of this study demonstrated that the GTAOTPPLN served as a platform that facilitated collaborative communication for topics of shared interest amongst members and supported occupational therapy practice and leadership in the region.

Key words | mots clés : *Advocacy, Evidence-based practice*

Monday 3:00-3:25
Poster defense: Community/Population | Advocacy /Change agent
Experiences of adults with stroke attending a peer-led support group
Carmen Bennison University of British Columbia, Katlyn Bieber University of British Columbia, Debbie Chow, Ben Mortenson University of British Columbia, Julia Schmidt University of British Columbia

Introduction: Due to institutional constraints in Canada, people with stroke have a limited timeframe (approximately six months) to participate in professional-led rehabilitation programs (Teasell & Salbach, 2019). This represents a narrow window during the recovery process. Peer support programs are frequently embedded into formal organizations to support community reintegration; however, the impact of grassroots (participant initiated and driven) support groups have not been evaluated. Objective: To explore participants' experiences in a community-based, grassroots, peer-led support group, researchers will examine why individuals participate in the program, the strengths of the program, and areas for improvement. Methods: This participatory project uses a concurrent nested mixed-methods study design, which draws on constructivist grounded theory (Charmaz, 2003). We have conducted 3 semi-structured virtual interviews and anticipate 10-12 more. An online survey will collect demographic data and self-reported ratings about how well the program is perceived to help individuals' recovery. Qualitative data will be reported using the COnsolidated REporting guidelines for Qualitative studies (Tong et al., 2007). Descriptive statistics will be used to characterize the quantitative data. Good Reporting of a Mixed Methods Study will be used to present the entire study (O'Cathain et al., 2008). Results: Information gathered will provide knowledge into experiences of a grassroots, peer-led support group. Future studies may evaluate implementation of peer-led support groups in other settings. Conclusions: It is necessary to explore feasible alternatives to the professional-led rehabilitation programs that will extend longer than six months post-stroke. Findings will provide information on grassroots peer-led support groups during the post-stroke recovery process.

Key words | mots clés : *Community development, Stroke*

Monday 3:00-3:25
Paper presentation: Adult | Mental health
Clinician/Operator Experiences Utilizing Virtual Reality for Combat-Related PTSD
Chelsea Jones Heroes in Mind Advocacy and Research Consortium (HiMARC), University of Alberta, Lorraine Smith-MacDonald Heroes in Mind Advocacy and Research Consortium (HiMARC), University of Alberta, Suzette Breamult-Phillips Heroes in Mind Advocacy and Research Consortium (HiMARC), University of Alberta

Motion-Assisted Multi-Modal Memory-Desentization and Reconsolidation (3MDR) is a virtual-reality based intervention developed for the Computer Assisted Rehabilitation ENvironment (CAREN). 3MDR has emerged as a promising intervention for combat-related post-traumatic stress disorder. 3MDR requires a clinician, often an occupational therapist, and a CAREN operator to facilitate the intervention. Facilitating 3MDR, which necessitates exposure of staff to graphic imagery and emotionally intense therapeutic engagements, necetates new and unique occupational demands. Secondary stress is emotional duress that results when an individual hears about the first-hand trauma experiences of another. This may be a risk for staff involved with 3MDR. The effect of 3MDR on clinicians and operators has yet to be examined. Objective: This mixed-methods pilot-project will analyze secondary stress, professional quality-of-life, and the experiences of clinicians and operators pre/post engagement with 3MDR. Methods: Operators (n=7) and 3MDR clinicians (n=12) from 4 countries will complete outcome measures pre-post providing the 3MDR intervention. Outcome measures include the Secondary Traumatic Stress Scale, Professional Quality of Life Scale, and the Cohan Perceived Stress Scale. Follow

up at 10 weeks will include a telephone interview that will be recorded, transcribed and thematically analyzed. Descriptive, non-parametric statistics comparing pre/post outcome measures will be calculated. Results: No statistically significant change pre/post 3MDR is expected on the outcome measures; however, qualitative analysis may reveal increased occupational stress. Conclusion: As novel mental health interventions emerge, investigation and awareness of the impact of these interventions on the patient and the staff involved is imperative.

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

Monday 3:00-3:25
Paper presentation: Not applicable | General/Professional issues/Practice
Competencies for occupational therapy practice in homelessness: A Delphi study
Carrie Anne Marshall Western University, Abrial Cooke Western University, Rebecca Gewurtz McMaster University, Skye Barbic University of British Columbia, Laurence Roy McGill University, Lysaght Rosemary Queen's University, Bonnie Kirsh University of Toronto

Introduction: Occupational therapists are increasingly supporting individuals with lived experiences of homelessness (ILEH). Objectives: To identify the competencies needed by occupational therapists in supporting ILEH across the trajectory of unhoused to housed. Methods: We conducted a Delphi study consisting of three rounds. Our team identified a list of 35 "expert" occupational therapists known for their expertise in practice/research with ILEH. In Round I, we distributed a survey using Qualtrics in which we asked experts to list the competencies needed by occupational therapists to support ILEH across the trajectory of unhoused to housed. Two members of our team compiled the list of competencies and restated each into statements that could be rated on a four-point Likert scale ranging from "never needed" to "always needed". In Round II, we distributed this list of statements in a survey sent to the same 35 occupational therapists. We calculated medians and interquartile ranges for each competency and excluded competencies based on pre-established criteria. In Round III, we redistributed a survey including the remaining list of competencies. Results: Of 35 potential participants, n=16 participated in Round I, n=20 participated in Round II, and n=18 participated in Round III. Participants represented Canada, United States, Brazil, UK, Ireland and New Zealand. Consensus was achieved on 93 competencies in 10 categories. Categories with the greatest number of competencies included occupational knowledge (n=18), followed by psychosocial competencies (n=16). Conclusions: Occupational therapy educators and practitioners may consider using this list of competencies to guide professional development for themselves and their students.

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

Monday 3:00-3:25
Poster defense: Child | Health and well-being
L'intérêt à participer à des activités intergénérationnelles chez les jeunes
Zoë Edger-Lacoursière Université de Montréal, Gabrielle Morin Université de Montréal, Marion Lack Université de Montréal, Johanne Filiatrault Université de Montréal

Introduction. L'accroissement du fossé actuel entre les générations justifie le financement et la mise en place d'activités intergénérationnelles pour favoriser l'inclusion sociale des aînés et réduire l'âgisme. Peu de recherches ont été réalisées sur la perspective des jeunes en matière d'activités intergénérationnelles, car la majorité des études sont centrées sur les bénéfices chez les aînés. Objectifs. Examiner les facteurs associés à la pratique et à l'intérêt à participer à des activités intergénérationnelles chez les jeunes.

Méthodes. 480 élèves de deux programmes différents d'une école secondaire ont été invités à compléter un questionnaire en ligne comprenant des questions sociodémographiques, sur leur intérêt à participer à une activité intergénérationnelle et sur la fréquence/satisfaction de leurs contacts avec des aînés. Une mesure d'âgisme (Fraboni Scale of Ageism-Revised) et deux questions ouvertes sur leurs motivations à participer sont également dans le questionnaire.

Résultats. 82 élèves ont complété le questionnaire. Les analyses montrent des liens significatifs : les filles ainsi que les élèves qui accordent davantage d'importance aux aînés dans leur famille font moins d'âgisme ; les élèves qui font moins d'âgisme sont plus intéressés à participer à des activités intergénérationnelles ; les élèves qui ont davantage de contacts familiaux avec des aînés et ceux qui sont moins satisfaits de ces contacts sont plus intéressés à participer à des activités intergénérationnelles.

Conclusions. Les tendances dégagées appuient l'importance d'établir des partenariats entre les organismes et les écoles pour stimuler l'intérêt des jeunes à participer à des activités intergénérationnelles et ainsi diminuer leurs perceptions négatives par rapport aux aînés.

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

Monday 3:00-3:25
Poster defense: Adult | Primary care/Primary healthcare/Population health
Modifying a relationship-building model to guide client-collaboration in primary care
Pamela Wener University of Manitoba, Lisa Diamond Univeristy of Manitoba

Introduction: Across Canada, the Patient's Medical Home with team-based collaborative care where professionals work together with patients and families to achieve optimal participation is quickly becoming the cornerstone of primary care. Patient/Client- and family-partnered care where clients are expected to be active members of the team is an essential component of the Patient's Medical Home. The Interprofessional Collaborative Relationship Building Model (ICRB) holds promise to guide teams to develop their primary care intra-team relationships. However, it is unknown if the ICRB could also guide clients in developing their relationship with the healthcare team. Objectives: This presentation will share the findings of a patient engagement project to modify the ICRB and suggest resources to accompany the model for patient use in primary care. Approach: Two researchers, one student, one primary care occupational therapist, and five people with primary care lived experience joined together to form a participatory action research team. After initial team formation activities, the research team used a series of three, two-hour engagement sessions via Zoom, that included web-based presentations, sticky note consensus building exercises, and email communication to explore the ICRB, model modifications, and suggestions for accompanying resources. All sessions were recorded and transcribed to ensure all suggestions were heard. Results: The research team revised ICRB and made suggestions for accompanying resources that would be helpful for patient use. Conclusions: The ICRB has the potential

to better equip patients/clients and their families to engage with the healthcare team within the Patient's Medical Home. Future work should focus on model and resource validation.

Key words | mots clés : *Community care, Interprofessional*

Monday 3:00-3:25
Poster defense: Older Adult | Health and well-being
What the literature says about digital storytelling in older adults
Adriana Ríos Rincón University of Alberta, Christine Daum University of Waterloo, Noelannah Neubauer University of Waterloo/University of Alberta, Aidan Comeau University of Alberta, Antonio Miguel Cruz University of Alberta/Glenrose Rehabilitation Hospital/University of Waterloo, Lili Liu University of Waterloo

Introduction: Digital storytelling, a method using technology to tell stories, is commonly used by clinicians working with older adults and can be used for reminiscence, life review, and reminiscence therapy. Objectives: A scoping literature review was conducted to: examine the range and extent of the use of digital storytelling in older adults and their caregivers; identify processes, methods, technologies, and; describe the evidence and the associated outcomes. Methods: Eight (Medline, EMBASE, PsycINFO, CINAHL, Abstracts in Social Gerontology, ERIC, Web of Science, Scopus) electronic databases were searched and 34 studies (out of 3890) were included. Results: Digital storytelling was used as a therapeutic means to improve cognitive, emotional or affective skills and to facilitate communication and social connection in older adults with dementia. The level of evidence regarding digital storytelling was low. Co-creation of digital stories emerged as a common strategy used with older adults. Conclusion: In occupational therapy, collaboration with the client and client-centred practice is critical to achieving therapeutic goals while respecting the client's dignity. Digital storytelling using a co-creation approach is a tangible way to uphold the personhood of people living with dementia. More rigorous research to assess the effectiveness of digital storytelling on outcome variables is needed.

Key words | mots clés : *Dementia, Technology*

Monday 3:35-4:00
Poster defense: Adult | Health and well-being
Perspectives on lower limb 3D-printed sockets and CAD/CAM technology
Marian Louise Miguel University of Toronto, Lynn Xiaolin Li University of Toronto, Clara Phillips West Park Healthcare Centre, Lee Verweel West Park Healthcare Centre, Marina Wasilewski University of Toronto, Crystal MacKay West Park Healthcare Centre

Rationale: Prostheses are critical for individuals with lower limb amputations (LLA) to maintain engagement in valued occupations and to improve quality of life. Computer-aided design and manufacturing (CAD/CAM) technology, such as 3D-printing, has the potential to improve satisfaction with the prosthetic socket which is the main component of the prosthesis that determines comfort (Karakoç et al., 2017). In order to enhance engagement with the 3D-printing process and to optimize the technology's acceptability, the perspectives of individuals with LLA and healthcare professionals (HCPs) must be captured. Objectives: The purpose of this study is to explore the perspectives of individuals with

LLA and HCPs on CAD/CAM technology and their experiences with the CAD/CAM process and with 3D-printed sockets. Methods: We will employ a qualitative descriptive approach. We will seek individuals with LLA who have a 3D-printed socket, and HCPs who have experience/expertise in amputee care or in the manufacturing process of lower limb prosthetic sockets. We will conduct one-on-one telephone interviews with participants using a semi-structured interview guide. Individuals with LLA will additionally complete the Socket Comfort Score. Data will be analyzed thematically. Practice implications: Our study can inform future iterations of the 3D-printing process and contribute to enhanced communication and education between individuals with LLA and HCPs. This can enhance the 3D-printing experience for individuals with LLA and improve satisfaction with 3D-printed sockets. Conclusions: The study will enhance our understanding of stakeholder perspectives on 3D-printing technology for individuals with LLA and improve the acceptance of the process and adoption of 3D-printed sockets.

Key words | mots clés : *Technology*

Monday 3:35-4:00
Paper presentation: Adult | Chronic conditions
Design of a Decision Support Tool for Workplace Disclosure Decision-making
Gayle Restall University of Manitoba, Francis Diaz University of Manitoba, Patrick Faucher Greorge & Fay Yee Centre for Healthcare Innovation, Kerstin Roger University of Manitoba

Background: Decision support tools are a resource for people making complex decisions about their own health and healthcare. There are few tools to support social decisions that affect occupational participation, such as workplace disclosure of a health condition. Objectives: To describe the development of a Decision Guide to support people living with HIV to choose whether to disclose their HIV-positive status in the workplace. Methods: The design strategy consisted of stakeholder input through a literature review, survey, community consultation, and creation of an online Decision Guide prototype. To evaluate the prototype, we used qualitative methods involving individual interviews and the think-aloud technique. Survey results were analyzed descriptively, community consultation data was analyzed thematically, and prototype evaluation interviews were analyzed using content analysis. Results: Ninety-four survey respondents identified existing resources and considerations for workplace disclosure decision-making. The 30 researcher, service provider, policy maker and people with HIV participants in the community consultation shared perspectives on the content and use of a decision support tool. Using design thinking methods, perspectives were transformed into an interactive online Decision Guide prototype to obtain in-depth feedback. Fourteen people with HIV and service providers participated in prototype evaluation by identifying benefits of the Guide, disclosure concerns, mitigation of disclosure risks and additional considerations for the Guide. Conclusions: The Decision Guide design process emphasized a multi-staged iterative approach with extensive stakeholder participation to develop a comprehensive, acceptable and useful tool. Decision support tools are a resource for people making complex social decisions that affect occupational participation.

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

Monday 3:35-4:00

Poster defense: Adult | Chronic conditions
Clinician Perspective on the Hand Intervention for Multiple Sclerosis (HIMS)
Aurora Cox University of British Columbia, Eloise Nicklin University of British Columbia, Denise Kendrick University of British Columbia, Jeremy Adderley University of British Columbia, Susan Forwell University of British Columbia

Introduction: An estimated 97, 300 Canadians are living with Multiple Sclerosis (MS) (Gilmour et al., 2018). The majority of those diagnosed with MS experience hand dysfunction, which significantly affects participation in occupations. Yet, there are few occupation focused interventions addressing hand dysfunction in MS. To address this gap, the HIMS program was developed with the aim of guiding clinical practice when treating hand dysfunction in MS and includes a detailed manual. The program includes both symptomatic and occupation-based strategies. Objectives: Using clinician feedback, this study aims to understand the clinical usability, feasibility and validity of the HIMS in neurorehabilitation clinics. Methods: To gain an understanding of occupational therapists' perspective of the HIMS, a descriptive interpretive, mixed-methods study design uses the Qualtrix platform to collect survey data and a semi-structured interview completed using the phone or the ZOOM platform. Descriptive statistics are used to summarize the survey data and thematic analysis is employed to understand the interview data. The results of this analysis may be used to inform further amendments to the HIMS. Results: We anticipate that the findings will confirm the clinical usability, feasibility, and validity of the HIMS in these settings. Conclusions: Treating hand dysfunction in MS is essential to promoting engagement in occupations. With the utility and validity of the program verified by the clinicians, integrating the HIMS into clinical practice supports adoption of the intervention and provides clinicians with best practice guidelines.

Key words | mots clés : *Hand therapy, Multiple sclerosis*

Monday 3:35-4:00
Paper presentation: Adult | Health and well-being
Exploring time use during the military to civilian transition
Megan Edgelow Queen's University, Ashley Williams, Shannon Hill, Linna Tam-Seto, Heidi Cramm

Introduction: Military-civilian-transition (MCT) refers broadly to the process of leaving military employment and becoming re-established in the civilian world. The cultural differences between military and civilian spheres can create challenges for Veterans as they make this transition. Objectives: To longitudinally describe the time use, mental health, and well-being of Canadian Armed Forces (CAF) members as they progress through the peri-release period of MCT. Methods: We conducted in-depth semi-structured interviews at two time points (T1 – within 6 months prior to release date and T2 – 6 to 9 months after the release date). Using MAXQDA to support our process, we used grounded theory techniques, moving from open, axial, and selective coding to organize the data, establish common themes, and theorize the data. Results: Based on the data from 75 English-language participants at T1 and 70 at T2, the experience of MCT was diverse. Many participants were still in the process of sorting through their various commitments, aspirations, health limitations, and evolving opportunities and demands. Some described challenges finding a balance for themselves in the absence of the external structure of military service; however, there were polarized outcomes, with some overwhelmed with numerous commitments while others struggled to motivate themselves to engage in activities.

Conclusions: This study is the first longitudinal in-depth qualitative study of MCT in the world. Given the richness of the data and the strength of the sample, our findings have implications for policy and programming and provide new insights into the experiences of CAF members and Veterans during MCT.

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

Monday 3:35-4:00
Poster defense: Child | Early childhood
Parents' experiences of and perspectives toward toilet training
Meghan Violette, Parisa Ghanouni

Introduction: Occupational therapists aim to provide family-centred and culturally relevant services. Understanding parents' experiences and perspectives is foundational to this process. Pediatric occupational therapists work with families who struggle with childhood toilet training, an essential skill that supports educational and community participation. Currently no reviews examine parents' experiences of and perspectives toward toilet training their children. Objectives: This narrative review will examine parents' experiences of and perspectives toward toilet training across sociocultural differences to inform family-centered practices. Methods: Five online databases (CINAHL, PsycINFO, Academic Search Premier, PubMed, MEDLINE) were searched up to October 2019 using key words (e.g., parent*, toilet train*, cultur*), yielding 366 initial results. 15 studies were retained following title, abstract, and full-text review for inclusion criteria. The remaining studies were appraised with McMaster critical appraisal tools. Results: Parents prioritize toilet training, with age of mastery being an important but variable subtask. Though similarities were noted in toilet training strategies and parental assessments of children's readiness signs, these also varied across culture and ethnicity, disability, access to resources, and gender. Toilet training approaches across Western countries primarily reflect a child-oriented approach, specifically in terms of readiness signs and toilet training methods. Conclusion: Parents value toilet training as a necessary and socially required skill that has implications for childhood emotional development. As such, toilet training is an important occupation for parents and children. Similarities across toilet training approaches do exist, but sociocultural differences should inform practitioners' approaches to service provision.

Key words | mots clés : *Evidence-based practice, School health*

Monday 3:35-4:00
Poster defense: Older Adult | General/Professional issues/Practice
Rubber meets the road: Intersecting clinical experience with digital-storytelling research
Kara Hollinda University of Alberta; Saskatchewan Health Authority, Christine Daum University of Waterloo; University of Alberta, Lili Liu University of Waterloo

Introduction: Digital storytelling is the process of a facilitator and an individual collaborating to co-create a narrative in the form of a short video. Digital storytelling has been used to create legacy pieces for older adults, including those living with dementia. Digital stories can improve client-centred care in supportive living facilities by sharing resident identities that span beyond their diagnoses. They are also a means of giving voice to residents and supporting life review. Despite its benefits, digital storytelling

has not been widely implemented in occupational therapy practice or supportive living facilities. Objectives: To examine the feasibility and barriers of implementing digital storytelling into facility-based practice, with the purpose to improve client-centred care. Approach: Critical reflexivity and pragmatic reasoning were used to examine the practicality of facility-based digital storytelling, drawing from the three perspectives of a recent occupational therapy graduate, a qualitative research assistant, and a practicing occupational therapist in a long-term care facility. Practice Implications: There is a gap between digital storytelling research findings, occupational therapy theory and curriculum, and the nature of clinical occupational therapy practice. This disconnect creates a professional practice issue in occupational therapy service provision and facility-based care. Conclusions: Clinical practice settings do not always enable interventions based on research due to pragmatic constraints within institutions. Occupational therapists are limited in their abilities to spark meaningful systemic change due to workload demands. Ideally, key principles from digital storytelling could form a set of "best practices" used with older adults living in supportive living facilities.

Key words | mots clés : *Long term care, Theory*

Monday 3:35-4:00
Paper presentation: Non-specific | General/Professional issues/Practice
Comment l'ergothérapie est-elle définie? Une étude de documents.
Marjorie Désormeaux-Moreau Université de Sherbrooke, Claude-Alie Wagnac Université de Sherbrooke

Introduction. Certaines études indiquent que l'appropriation de l'identité professionnelle demeure ambiguë et plus faible chez les ergothérapeutes que chez d'autres professionnels de la santé. Plusieurs peinent d'ailleurs à définir l'ergothérapie, ce qui nuira à la différenciation des rôles en contexte interdisciplinaire et à la revendication des actes relevant de leur champ d'expertise, en plus de se répercuter sur la qualité des services. Objectif. L'étude visait à répondre à la question: « Qu'est-ce que l'ergothérapie ? » L'objectif était de dégager les thèmes par lesquels des regroupements membres de la Fédération mondiale des ergothérapeutes définissent la profession. Méthode. Suivant un devis de recherche de type étude de documents, la recherche s'est déroulée en 2 étapes : 1) répertorier les définitions francophones et anglophones comprises dans le document Definitions of Occupational Therapy from Member Organizations (WFOT, 2018) et 2) les soumettre à une analyse thématique inductive. Résultats. 57 définitions ont été identifiées, dont 7 en français et 44 en anglais. Huit thèmes ont été relevés : 1) la nature de la profession d'ergothérapeute et 2) ses champs d'activités, 3) la nature de son raisonnement, 4) ses visées, 5) ses approches, 6) ses moyens d'intervention, 7) les milieux où elle s'exerce et 8) les personnes pouvant en bénéficier. Conclusion. Cette étude aura permis une clarification conceptuelle susceptible de favoriser les discussions entourant la compréhension et la représentation de la profession d'ergothérapeute. Il est souhaité que ses retombées contribuent à soutenir et consolider la construction identitaire des ergothérapeutes ainsi qu'à valoriser leur spécificité.

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

Tuesday 10:00-11:55
Hands-on learning session: Non-specific | General/Professional issues/Practice
Documentation can harm: Anti-oppressive documentation practices for occupational therapists

Marie-Lyne Grenier McGill University, Janna MacLachlan University of Toronto

Introduction: Documentation is an important part of occupational therapy practice and occupational therapy education. Documentation practices are becoming increasingly regulated; however, we argue that some of our current documentation practices have the potential to lead to healthcare harms and the suppression of human rights, for example, by inscribing personal bias and practitioner or institutional priorities and values. Harm can result as documentation contributes to shaping actions of practitioners, perceptions of clients by colleagues, and the occupational opportunities available to clients. By recognizing how texts are socially constructed and employing anti-oppressive documentation approaches, practitioners can resist such harms. Objectives: The purpose of this hands-on workshop is to illustrate and invite critical reflection on current documentation practices, as well as brainstorm and apply alternative practices grounded in anti-oppression, resistance and human rights. Session Description: This hands-on workshop will begin with a 35-minute presentation, introducing key concepts related to (anti-)oppressive documentation practices. Presenters will illustrate some of the ways that documentation can perpetuate harms and human rights violations in varied practice areas. Participants will learn how to apply concepts of critical reflexivity, relational accountability, structural competency and cultural humility to their documentation practices. The initial presentation will be followed by a 40-minute hands-on workshop (small group work), where participants will have the opportunity to practice applying learned concepts with the support of a facilitator. The session will conclude with a 15-minute question and answer period. Practice Implications: Documentation practices have the potential either to perpetuate harms and human rights violations or be a site of resistance. It is important that, as healthcare professionals, educators, and students, we reflect on our own practices and make changes that minimize harms and uphold human rights. In the context of current movements drawing attention to social inequities, occupational therapists have a timely responsibility to lead such changes in their interprofessional teams. Conclusions: During this hands-on workshop, participants will learn to challenge the ongoing use of oppressive documentation practices and brainstorm/apply ones that minimize harms and work toward upholding human rights.

Key words | mots clés : *Occupational justice, Theory*

Tuesday 10:00-11:00
Extended discussion: Child | Chronic conditions
A multi-year interagency community engagement intervention for youth with disabilities
Laura Hartman Holland Bloorview Kids Rehabilitation Hospital, Carolyn McDougall Holland Bloorview Kids Rehabilitation Hospital, Kari Renahan Children's Treatment Network of York Simcoe, York Region District School Board, Janice Archer Children's Treatment Network of York Simcoe, York Region District School Board, Nadia Niles-Campbell Holland Bloorview Kids Rehabilitation Hospital, Anna Oh Holland Bloorview Kids Rehabilitation Hospital, C.J. Curran Holland Bloorview Kids Rehabilitation Hospital, Kim Hesketh Children's Treatment Network of York Simcoe, Stephanie Ellis York Region District School Board,

Introduction: Our interagency team created the Youth in Charge (YiC) program to enhance opportunities for high school students with physical disabilities and their families to take charge of their lives as they grow capacity in community engagement and transition to adulthood. The program combines experiential learning with life skills training over 1 to 3 years. Youth and parents have opportunities to

learn from one another and lived-experience mentors. Objectives: We aim to implement best practices in community engagement and participation for transition-aged youth with disabilities, which include interagency collaboration, early exposure to real-world opportunities, and family engagement. Session description: The session will begin with a presentation of the evidence, clinical/lived experience, and resources that contribute to our program design and refinement, and provide an overview of the research and evaluation outcomes of a 3-year study on this program. We will then tie this information together via our program logic model. The latter half of the session will include a facilitated discussion and participation exercise with attendees to consider how their agencies can partner for shared success. Practice implications: The work presented will share client, family, clinician, and administrator perspectives of our model. Our logic model will walk attendees through our methods for implementing best transition practices with shared resources, and our mixed methods research outcomes will demonstrate the impact of such best practices as well as evidence to support our program of implementation. Whether hoping to learn from our model, our collaboration, or more about fostering authentic community engagement for transition-aged youth, attendees will be able to reconsider options for implementing best practices into their programs moving forward. Conclusions: Building the practical, emotional, and cognitive skills required to engage meaningfully in one's community is a process that is fostered by support and safe opportunities to practice. Having a program model to integrate best practices, outcomes, and a vision for how time and resources can best be allocated to meet program goals can be essential to facilitating success. Transition-aged youth with disabilities and families reported many benefits from participating in our program that have extended into their daily participation and engagement.

Key words | mots clés : *Evidence-based practice, School health*

Tuesday 10:00-10:25
Poster defense: Not applicable | Occupational therapy education
Using Video-recorded Interviews in the Occupational Therapy Admissions Process
Susan Mulholland University of Alberta, Brendan Concannon University of Alberta, Shaniff Esmail University of Alberta, Karin Werther University of Alberta, Eleni Stroulia University of Alberta, Ruby De Jesus University of Alberta, Mary Roduta Roberts University of Alberta

Introduction: Admission processes into Master of Science in occupational therapy programs tend to focus on academic achievements. Non-cognitive attributes are more difficult to discern, and typically are captured within written admissions files that may include a statement of purpose, resume, and reference letters. Currently, little information exists related to how assessors can best determine non-cognitive attributes in applicants and whether a recorded interview or paper formats provides better data for the admissions decision making process. Objectives: This study aims to investigate assessor's impressions while appraising OT applicants' written and online video materials for non-cognitive attributes. Methods: This is a mixed method cross-over study. Applicant responses to pre-recorded questions were video recorded. Occupational therapists reviewed both the video and applicants' written admission file. They then completed a survey that included a Likert scale rating of the applicant's non-cognitive attributes as well as were asked to provide written rationale for their rating. Results: Qualitative and quantitative data will be shared, including benefits and limitations to the assessor appraisal process. In particular, there will be a focus on non-cognitive attributes such as leadership,

communication, creativity and professionalism. Conclusions: Insight into how assessors best learn about applicant's non-cognitive attributes is critical as we strive to shift away from Grade Point Average focused admissions decision making. Seeking applicants with strong non-cognitive attributes will promote diversification within our program and ultimately profession.

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

Tuesday 10:00-10:25
Poster defense: Adult | Mental health
Living well with voices: An occupational perspective from service-users
Eire Murphy University of British Columbia, Rachel Simpson University of British Columbia, Andrea Harowitz, Gill Walker, Regina Casey, Michael Lee

Introduction: The Hearing Voices Movement is a service-user led initiative challenging traditional biomedical understandings of voice-hearing, and working towards reframing conventional notions of coping and recovery for individuals who hear voices and/or have unique perceptual experiences. Calls to action stemming from this initiative include developing a better understanding of the lived experience of voice-hearers and how they create a personal sense of well-being, and identifying appropriate and meaningful outcomes of intervention that move beyond eliminating voices (Corstens et al, 2014). Objectives: This research explores the experience of 'living well' as defined by voice-hearing participants, and uses the Do-Live-Well Framework (Moll et al., 2015) to better understand the role of occupation in fostering a sense of 'living well' for voice-hearers. Investigation will centre on the activity patterns of participants' chosen occupations, how these occupations fit into the various dimensions of doing outlined in the Do-Live-Well Framework, and what role these may play in creating an individual sense of 'living well'. Methods: 3-6 semi-structured interviews will be conducted with past and current participants of a psychoeducational group targeting voice-hearers. Interviews will be transcribed and analyzed using Interpretive Phenomenological Analysis. Results: Outcomes of this research will provide insight into the experience of 'living well' for voice-hearers, and the role that occupation plays in creating a sense of 'living well'. Conclusions: This research contributes the perspectives of voice-hearers to current discourse around recovery for this population, and proposes 'living well' as a client-centred outcome to strive for during occupational therapy intervention with voice-hearers.

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

Tuesday 10:00-10:25
CSOS paper: Adult | Health and well-being
Productivity of Canadian armed forces veterans following military-to-civilian transition
Shannon Hill Queen's University, Kimberely Smith-Evans Mount Saint Vincent University, Megan Edgelow Queen's University, Heidi Cramm Queen's University

Introduction: Military-to-civilian transition (MCT) refers broadly to the process of leaving military service and transitioning to civilian life. Taking steps to prepare for the MCT and having a vision for productivity-related occupations in post-release life can be crucial elements of moving on from military life. Objectives: Longitudinally describe productivity transitions for CAF Veterans. Methods: In-depth semi-

structured interviews were used to collect data from participants at two time points (T1 – within six months of release date from CAF and T2 – six to twelve months after release date from CAF). Using MAXQDA, a qualitative analysis software, grounded theory techniques of open, axial, and selective coding were used to analyze the data and identify common themes. Results: In total, data were collected from 75 English-language participants at T1 and 70 English-language participants at T2. Having a vision for post-release life emerged as crucial for moving on from military life. While many participants stressed the importance of meaning and purpose derived through a career subsequent to MCT, some participants reflected on their perceptions of belonging within the civilian workforce. For some, post-release productivity took the form of educational pursuits to gain new skills or to pursue personal interests. Overall, participants stressed the importance of thoughtful planning and readiness for optimal transition to new productivity roles. Conclusions: This longitudinal qualitative study provides the first in-depth exploration of the mental health and well-being of CAF Veterans during the MCT process. Findings are relevant to occupational therapists working to support successful transitions to meaningful productivity roles.

Key words | mots clés : *Community care*

Tuesday 10:00-10:35
Paper presentation: Older Adult | Health and well-being
Maltraitance organisationnelle auprès des aînés : enjeux éthiques en ergothérapie
Mélanie Ruest Université du Québec à Trois-Rivières, Marie-Josée Drolet Université du Québec à Trois-Rivières, Marie-Michèle Lord Université du Québec à Trois-Rivières, Chantal Viscogliosi Université de Sherbrooke, Chantal Pinard Université du Québec à Trois-Rivières

Introduction: La maltraitance organisationnelle (toute situation préjudiciable créée ou tolérée par les procédures d'organisations responsables d'offrir des soins), qui survient en Centre d'hébergement et de soins de longue durée (CHSLD), fait de plus en plus l'objet de questionnements sociaux, notamment avec la pandémie actuelle. La maltraitance organisationnelle entraîne plusieurs conséquences négatives sur les aînés et les intervenants. Comme le note l'Ordre des ergothérapeutes du Québec (2016), les ergothérapeutes sont des témoins importants de la maltraitance et peuvent identifier les enjeux éthiques qui lui sont associés. Or ces derniers demeurent très peu documentés. Objectifs: Cette présentation vise à (1) décrire les enjeux éthiques vécus par les ergothérapeutes en lien avec la maltraitance organisationnelle subie par les aînés et (2) identifier diverses pistes de solutions afin d'adresser ces enjeux dans la pratique. Méthodes: Devis phénoménologique. Des entretiens semi-dirigés furent réalisés avec 18 ergothérapeutes (15 cliniciens et 3 gestionnaires) québécois œuvrant en CHSLD. Une réduction phénoménologique des verbatim transcrits fut complétée suivant les étapes de Giorgi (1997). Résultats: L'analyse des enjeux éthiques liés à la maltraitance organisationnelle a permis d'en identifier les principales sources: manque de ressources, sécurité et survie à tout prix, faux milieux de vie, non-respect de la dignité humaine et non-réponse aux besoins fondamentaux ainsi que différents conflits de loyauté. En termes de solutions, une approche participative de résolution des enjeux complexes est à privilégier. Conclusions: Les ergothérapeutes sont des témoins privilégiés de la maltraitance organisationnelle en CHSLD et peuvent être des acteurs clés pour l'identifier et la contrer.

Key words | mots clés : *Evidence-based practice, Long term care*

Tuesday 10:00-11:00
Extended discussion: Community/Population | Mental health
Risk management techniques for facilitating psychoeducational groups using telepractice
Stéphanie St-Cyr The Ottawa Hospital

Introduction: As a result of the COVID 19 pandemic and the physical distancing guidelines from public health that followed, hospital facilitated outpatient programs were required to rapidly change their method of service delivery. One such change was to transform a traditionally in-person intensive 6-week mental health day hospital program that offers psychotherapy and psychoeducational groups 4 days per week to a 100% virtual program. This change enabled a continuity of community-based care to adult individuals at high-risk of clinical decompensation and hospitalization should care have been paused or discontinued as a result of the pandemic. Research is scarce with regards to practice guidelines on how to facilitate psychoeducational groups using telepractice, thus development and delivery of a virtual psychoeducational program can be guided using risk management techniques. Objectives: Highlight risks that can be encountered when utilizing telepractice to facilitate psychoeducational groups. Share processes and key practice needs that can help develop safe and secure virtual psychoeducational groups. Session description: Review the evidence of employing telepractice to facilitate psychoeducational groups. View a mock-up session of an occupational therapist facilitating a psychoeducational group utilizing telepractice. Identify the risks encountered by clients and by the occupational therapist in the mock-up session. Discuss risks that can be encountered when developing and facilitating virtual psychoeducational groups. Review processes that can be put in place and risk management techniques that can be employed to manage these risks. Practice implication: Occupational therapists will be more aware of the risks involved when utilizing telepractice to facilitate psychoeducational groups and will be more informed of the techniques that can be employed to manage them. Conclusion: Risk management is a viable option for safely utilizing telepractice to facilitate psychoeducational groups, but more research is required to provide practice guidelines.

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

Tuesday 10:35-11:00
Poster defense: Adult | Health and well-being
Health and health service access during military to civilian transition
Ashley Williams Queen's University, Kim Ritchie Queen's University, Alyson Mahar University of Manitoba, Heidi Cramm Queen's University

Introduction: Military-to-civilian-transition (MCT) refers broadly to the process of leaving military service and transitioning to civilian life. One dimension of the MCT involves the shift for a federal military health system to provincially-administered health systems. These systems operate very differently, which can complicate the transition between health systems for Veterans, who are more likely to experience health problems than the Canadian general population. Objective: Longitudinally describe CAF members/Veterans health and health service transition during MCT. Methods: In-depth semi-structured interviews were conducted with participants within 6 months prior to release (T1) and again 6 to 9 months after (T2). To analyse the data, we used grounded theory techniques supported by MAXQDA

software. This involved open, axial, and selective coding to organize, generate themes from, and theorize the data. Results: There were 75 participants at T1 and 70 at T2. Participants described diverse experiences of adjusting to pre-existing or emergent health conditions. Participants discussed differences in health service access across military vs civilian systems and adjustments required to adapt to provincial systems. Establishing new health provider networks was impacted by geographic location, social connections, luck, and significant persistence. Delays in accessing primary care resulted in disruptions in health services, particularly for those with ongoing health problems. Conclusions: This is the first longitudinal qualitative study of MCT globally. The robust sample and richness of the data mean that our results have implications for policy and program development as well as clinicians working with CAF members/Veterans, including occupational therapists.

Key words | mots clés : *Mental health*

Tuesday 10:35-11:00
Paper presentation: Non-specific | Health and well-being
L'engagement occupationnel des personnes présentant une déficience intellectuelle profonde
Camille Gauthier-Boudreault Université de Sherbrooke, Véronique Rochon Université de Sherbrooke, Frances Gallagher Université de Sherbrooke, Mélanie Couture Université de Sherbrooke

Introduction : Malgré la connaissance des effets positifs de l'engagement occupationnel, force est de constater que plusieurs personnes n'ont pas accès à des occupations signifiantes. Telle est la réalité de plusieurs personnes présentant une déficience intellectuelle (DI) profonde. Des auteurs relèvent notamment une méconnaissance des intervenants quant à leur potentiel d'engagement occupationnel et aux occupations pouvant favoriser le développement de leurs capacités. Objectifs : Cette étude visait à décrire le potentiel d'engagement occupationnel des personnes ayant une DI profonde et brosser un portrait des initiatives visant à le favoriser. Méthodes : Une étude de la portée a été menée afin d'explorer la littérature grise et scientifique. Deux membres de l'équipe de recherche ont procédé à l'identification des documents et à la synthèse des données. Des observations dans deux organismes communautaires ont également été réalisées afin d'enrichir les données provenant de la littérature. Résultats : Différentes initiatives visant à offrir des stimulations sensorielles, motrices et cognitives ont été identifiées, telles que les histoires multisensorielles. Divers projets à long terme peuvent également favoriser leur engagement (ex. marché de Noël, vernissage). La possibilité d'être autodéterminé, de communiquer et d'interagir avec autrui est aussi ressortie comme essentiel pour leur engagement occupationnel. Conclusion : Les personnes présentant une DI profonde peuvent s'engager dans diverses occupations malgré leurs incapacités sur le plan intellectuel et moteur. Une meilleure connaissance de leur potentiel favorisera la mise en œuvre d'une offre de services en adéquation avec leurs besoins.

Key words | mots clés : *Occupational justice, Occupational science*

Tuesday 10:35-11:00
Poster defense: Older Adult | Chronic conditions
Implantation d'un espace sensoriel pour aînés manifestant des comportements réactifs
Chloé Aquin Institut universitaire de gériatrie de Montréal, Camille Alarie Université de Montréal, Florence Dionne Université de Montréal, Nathalie Bier Centre de recherche de l'Institut universitaire de

gériatrie de Montréal, Anne Bourbonnais Centre de recherche de l'Institut universitaire de gériatrie de Montréal, Ovidiu Lungu Centre de recherche de l'Institut universitaire de gériatrie de Montréal, Marie-Andrée Bruneau Centre de recherche de l'Institut universitaire de gériatrie de Montréal

Introduction : Les comportements réactifs présents chez les aînés ayant des troubles neurocognitifs majeurs sont devenus un enjeu important pour les milieux de soins de longue durée (SLD). Les approches non pharmacologiques y sont recommandées en premier lieu. Parmi elles, l'utilisation d'activités sensorielles constitue une intervention pertinente puisqu'elle fait appel à des capacités préservées. Ces activités ont lieu dans un espace sensoriel soit un environnement accessible équipé de matériel sensoriel. Cependant, peu d'études ont documenté le processus d'implantation de ce type d'environnement en contexte de SLD. Objectif : Cette étude visait à recueillir les perceptions des soignants par rapport à l'implantation d'un espace sensoriel en SLD. Méthodes : Une étude qualitative descriptive et inductive a été réalisée. Les soignants ont reçu une formation et utilisé l'espace avec différents aînés pendant trois mois. Six entrevues semi-structurées ont été menées trois mois après la formation et l'utilisation quotidienne de l'espace sensoriel. Les données ont été analysées via une analyse de contenu thématique. Résultats : Différents facilitateurs à l'implantation ont été identifiés dont l'aménagement de l'espace, la variété de matériel, la formation et l'intérêt des soignants. Des obstacles ont été soulevés en termes d'intérêt et de sécurité de certains types de matériel, du temps de formation et son suivi, et de la faible utilisation la nuit. Des effets bénéfiques ont été perçus par les soignants sur eux-mêmes et sur les aînés. Conclusions : Cette étude expose les facilitateurs et obstacles à l'implantation d'un espace sensoriel en SLD et ses bénéfices en SLD.

Key words | mots clés : *Dementia, Long term care*

Tuesday 11:30-12:30
Sponsored session: |
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  Exam day
  Q & A

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Key words | mots clés :

Tuesday 11:30-11:55
Poster defense: Child | General/Professional issues/Practice
Exploring the role of OT in pediatric palliative care
Meaghan Walker University of Toronto, Torie Vaughan University of Toronto, Adam Rapoport The Hospital for Sick Children, Yani Hamdani University of Toronto

Introduction: Occupations of children experiencing life limiting illnesses receiving palliative care shift and change, which has implications for their quality of life (QoL). Despite the strong overlap between palliative care priorities and the scope of Occupational Therapy (OT) practice related to QoL, there is a paucity of literature exploring the role of occupational therapists (OTs) in palliative care, particularly for pediatric populations. It is important to address this knowledge gap because OTs can potentially make significant contributions to improving the QoL of children in palliative care through meaningful occupations. Objectives: This study explored: 1) current knowledge on the OT role in palliative care; 2) the occupational aims and goals of palliative care OT; and 3) how OTs can enable meaningful occupational engagement of children with life limiting conditions. Methods: This qualitative study involved two focus groups with: 1) OTs practicing in palliative care (n=5); and 2) healthcare providers (non-OTs) practicing in pediatric palliative care (n=10). Transcripts were thematically analyzed using a phenomenological approach, within an interpretive paradigm. Practice Implications: The study results contribute new knowledge about the role, goals and aims of OT in pediatric palliative care, and inform best practices for promoting and supporting meaningful occupational engagement and QoL for children with life limiting illnesses. Conclusions: This research is a critical catalyst for leveraging OT clinical skills and knowledge on enabling meaningful occupation in application to working with children with life limiting conditions and for expanding the scope of OT in pediatric palliative care.

Key words | mots clés : *Evidence-based practice, Palliative care*

Tuesday 11:30-11:55
Poster defense: Adult | Mental health
Generalizability of social skills training for individuals with mental illness
Kathleen Hoy University of Toronto, Samara Roher University of Toronto, Andrea Duncan University of Toronto

Rationale: A primary occupational goal of individuals with serious mental illness (SMI) is engaging in meaningful social relationships (Mccorkle et al., 2009). Social skills training (SST) aims to improve social competence and develop positive social behaviours in individuals with SMI. Researchers have questioned the generalizability of social skills learned in a clinical setting into the everyday lives of clients (Gottlieb et al., 2005). Given the importance of transferable skills to day-to-day functioning, current methods used to promote generalizability in SST programs must be further explored. Objectives: The purpose of this study is to explore what is known from the existing literature about current

intervention techniques used to address generalizability of SST programs targeted at individuals with SMI. Methods: A scoping review methodology was selected to explore the breadth of literature within this field to allow for a comprehensive investigation of the methods used to address generalizability in current SST programs. Practice Implications: An understanding of the techniques used to improve the generalizability of SST programs will enable occupational therapists in this field to ensure that skill-based therapies will be transferable to their clients' occupational goals and activities of daily living. Conclusions: In order for STT to be clinically effective in improving the social functioning of individuals with SMI, it is necessary to promote the transfer of skills from the clinical setting to the clients' day-to-day social life. In identifying the techniques used to address generalizability in SST, occupational therapists will be able to integrate these findings into their practice approaches.

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

Tuesday 11:30-11:55
Paper presentation: Adult | General/Professional issues/Practice
Canadian Armed Forces Healthcare Professional Perceptions on Cognitive Screen/Assessment Processes
Chelsea Jones Heroes in Mind Advocacy and Research Consortium (HiMARC), University of Alberta, Lorraine Smith-MacDonald Heroes in Mind Advocacy and Research Consortium (HiMARC), University of Alberta, Suzette Breamult-Phillips Heroes in Mind Advocacy and Research Consortium (HiMARC), University of Alberta

Introduction: Canadian Armed Forces (CAF) Service Members (SMs) experience a higher prevalence of mild traumatic brain injuries (mTBI) compared to Canadian civilians. As cognitive dysfunction may be experienced after injury or illness, assessment of cognitive functioning is necessary to ensure CAF-SMs can safely and efficiently perform their duties post-injury. Effective treatment and rehabilitation to address cognitive dysfunction can be prescribed once reliable, valid, specific, and evidence-based cognitive screening/assessment are performed by healthcare professionals. To date, policies and protocols that include cognitive screening/assessment as part of a mTBI rehabilitation strategy have not been established within Canadian Forces Health Services (CFHS). Objective: To explore the experiences of CFHS healthcare professionals who perform cognitive screens/assessments in their practice, through identifying: (1) perceptions of facilitators and barriers to cognitive assessment practices, and; (2) recommendations for improving the practice of cognitive assessment for injured CAF-SMs. Methods: A qualitative thematic analysis nested within an implementation science approach was performed. Seventeen CFHS healthcare professionals were interviewed with the data being transcribed, coded, and analyzed. Results: Themes included: (1) Education and knowledge of clinicians and staff regarding mTBI and cognitive screens/assessments, (2) Multidisciplinary collaboration, (3) Stigma, awareness, and attitudes of CAF-SMs, (4) Availability of resources, and; (5) Cognitive screen/assessment tools. Themes were further broken down under the categories of facilitators, barriers, and recommendations. Conclusion: Through the development and implementation of cognitive screen/assessment policies and protocols, CFHS health professionals will be supported to best assess, treat and rehabilitate cognitive dysfunction amongst CAF-SMs.

Key words | mots clés : *Assessments, Interprofessional*

Tuesday 11:30-11:55
Poster defense: Child | Early childhood
Interprofessional collaboration to serve children with autism spectrum disorder.
Amanda Ball, Morgan Ticehurst, Paulina Finak, Beata Batorowicz

Introduction: Successful interprofessional collaboration is pivotal in improving clients' care and meeting the current demands placed on the healthcare system. It is imperative that professionals understand how to collaborate to support family and client-centered care when working with children and youth with autism spectrum disorder (ASD). However, little research has been done on the topic of collaboration between rehabilitation therapists and Clinical Supervisors of applied behavioural analysis (ABA) services. Objectives: The objectives of this study are to: a) examine current practices of rehabilitation therapists [occupational therapists, speech-language pathologists, physiotherapists], and Clinical Supervisors of ABA services, working with children and youth (ages 0-21) with ASD, across Canada and b) identify facilitators and barriers to successful interprofessional collaboration. Methods: We developed a survey based on the Canadian Interprofessional Competency Framework (CIHC, 2010) and 'Gearing up' conceptual framework on interprofessional collaboration (Mulvale et al., 2016). The survey domains are: client-centered care, communication, team functioning, collaborative leadership, practice context, role clarification, and conflict resolution. Based on sample size calculations, this cross-sectional survey gathers data from 350 specialists, recruited from across Canada. Data will be analysed using descriptive statistics, correlational statistics, and thematic analysis of responses to open-ended questions. Practice Implication: This study will contribute critical knowledge about the interprofessional collaboration practices for children with ASD and their families across Canada. Conclusion: This study will inform the best practices and policy for collaboration between families, rehabilitation clinicians, and Clinical Supervisors of ABA services.

Key words | mots clés : *Autism, Interprofessional*

Tuesday 11:30-11:55
Paper presentation: Community/Population | Mental health
Exploring assessment tools and interventions for refugees' mental health
Caitlin Stone Queen's University, Keerthiha Ravichandran Queen's University, Rediet Getachew Ayele Queen's University, Setareh Ghahari Queen's University

Rationale: Occupational therapists (OTs) have an essential role in supporting refugees' integration into the Canadian community. However, there is no consensus on the assessments and interventions that can be used when providing mental health care with refugee populations. Objectives: Our scoping review objectives were to identify resources currently being used in research and practice and to determine areas for creation or modification of assessment and intervention practices for OTs who provide mental health service to refugees. Method: We searched Medline, CINAHL, PsycINFO, and EMBASE databases. We found 25 articles published between 2010 and 2020 and discussed interventions used by OTs, nurses, or other professionals who provide mental health services to refugee populations. Results: We found a significant gap in the literature about OT practice with this population group. A myriad of assessment tools are used across healthcare professions. Clinicians must take care to ensure

that assessments are culturally sensitive and population specific. Altogether, 15 categories of interventions were used across the surveyed articles, the three most popular approaches (e.g. psychoeducation, community-health interventions, and spiritual or mindfulness-based interventions) are already familiar to OT practice. The review also identified specific strategies for clinicians to enhance their service for refugees. Some examples are reflexivity, advocacy, involvement in a clinician's support group within this practice area, and prioritizing continued education. Conclusion: There is no "one-size-fits-all" approach to mental health problems in refugee populations, more focus on cultivating cultural humility is required to develop meaningful care plans.

Key words | mots clés : *Mental health*

Tuesday 11:30-11:55
Paper presentation: Older Adult | General/Professional issues/Practice
Intégration des résultats probants auprès de personnes présentant une démence
Julie Lahaie Université du Québec à Trois-Rivieres, Martine Brousseau Université du Québec à Trois-Rivieres

Introduction : La gestion des symptômes comportementaux et psychologiques reliés à la démence [SCPD] fait de plus en plus partie de la pratique des ergothérapeutes. Il apparaît pertinent de savoir si ceux-ci intègrent les interventions probantes pour intervenir auprès de ces personnes, d'autant plus que des revues systématiques montrent que plusieurs interventions sont reconnues efficaces dans la réduction des SCPD (Abraha et al., 2017; Legere et al., 2018; Meyer & O'Okeefe, 2018 ; Scales et al., 2018). Aussi, il y a lieu de questionner si les ergothérapeutes intègrent les recommandations émises dans les documents de référence ministériels (MSSS, 2014a; MSSS, 2014b; MSSS, 2014c). L'intégration des interventions efficaces et des recommandations ministérielles représentent une pratique de qualité. Objectif : Décrire comment les ergothérapeutes intègrent les résultats probants dans leur pratique auprès des personnes présentant des SCPD. Méthode : Une recherche descriptive avec devis mixte simultané avec triangulation comprenant un questionnaire en ligne et des entrevues semi-dirigées a été réalisée auprès de 86 ergothérapeutes québécois. Résultats : Les résultats révèlent que les interventions décrites comme étant plus efficaces sont les moins appliquées par les ergothérapeutes. Les résultats montrent que ces ergothérapeutes proposent des interventions pour lesquelles ils perçoivent qu'ils sont compétents. Ils privilégient l'expérience clinique et les formations antérieures pour guider leur pratique. Conclusion : Comprendre les facteurs influençant les ergothérapeutes dans leur choix d'intervention à privilégier auprès des personnes atteintes permet de proposer des solutions pour optimiser l'intégration des résultats probants dans la pratique.

Key words | mots clés : *Dementia, Evidence-based practice*

Tuesday 12:05-12:30
Poster defense: Older Adult | Primary care/Primary healthcare/Population health
Evidence-based assessments of daily performance in MCI or Alzheimer's Disease
Alia Osman McGill University, Isabelle Gélinas McGill University, Patricia Belchior McGill University

Introduction: Mild Cognitive Impairment (MCI) and Alzheimer's Disease (AD) lead to decline in performance in activities of daily living (ADLs). Multiple questionnaires assess this construct among older adults. However, new measures have emerged since the last systematic review; thus, the necessity of a subsequent update including an examination of their quality. Objectives: Review existing literature studying psychometric properties (e.g. validity, reliability and sensitivity) of questionnaires assessing performance in ADLs of older adults with MCI or AD. Methods: A systematic review was conducted across Medline, CINAHL and PsychINFO using a combination of keywords related to ADLs, psychometrics, MCI and AD. Studies were included if they met the following criteria: assessments of performance of ADLs for older adults with AD or MCI, reporting a minimum of one measurement property, publications other than primary research articles, published before September 2020 in English or French. The methodological quality of psychometric properties was assessed using the COSMIN checklist. Results: A total of 2, 503 articles were screened and filtered down to 47 articles respecting inclusion criteria. Data extraction and analysis were conducted by two researchers. Retained measures and results pertaining to the critical appraisal of their psychometric properties will be presented. Conclusion: Considering the increasing prevalence of older adults with MCI or AD, the use of questionnaires established on strong measurement properties is crucial to evaluate decline in ADL performance and plan suitable interventions. This review provides evidence for clinicians and researchers that can be utilized in the selection of questionnaires to evaluate this population.

Key words | mots clés : *Assessments, Dementia*

Tuesday 12:05-12:30
Sponsored session: |
Introducing the 2021 Competencies for Occupational Therapists in Canada

Introduction. Competencies outline the expected practice for members of a profession. There have been several competency documents for occupational therapists in Canada, such as the "Essential Competencies" produced by the regulatory organizations and the "Profile of Practice" developed by the professional association. Objective. To introduce the new Competencies for Occupational Therapists in Canada, which will be released later in 2021. Approach. The Association of Occupational Therapy Regulatory Organization (ACOTRO), the Association of Canadian Occupational Therapy University Programs (ACOTUP) and the Canadian Association of Occupational Therapists (CAOT) developed a tripartite agreement to develop a shared competency document for occupational therapists in Canada. A steering committee with representatives from each organization has worked for several years to develop and oversee the project, in consultation with competency experts, a working group of occupational therapists, and members knowledgeable in issues of equity and justice. Released in draft form for broad consultation with every occupational therapist in Canada in March 2021, the final version of this document is expected later this year. Practice Implications. This session will focus on how the new competency document differs from previous versions, what is new, and what impact will this have on OTs, OT educators and OT regulators. Conclusion. The session initiates the conversation about implementation of these new expectations for occupational therapists in Canada.

Key words | mots clés :

Tuesday 12:05-12:30
Poster defense: Adult | General/Professional issues/Practice
Women's health: A role for occupational therapy? A scoping review
Tess Zehr McMaster University, Tessa Dickison McMaster University, Vanessa Lombardo McMaster University, Laura Ruby McMaster University, Kelly Stewart St. Joseph's Healthcare Hamilton

Introduction: Women's health encompasses health concerns uniquely faced by women that contribute to decreased health, well-being, and quality of life. Outpatient clinics focusing solely on addressing women's health concerns exist across Canada. Although these clinics use a multidisciplinary team approach, occupational therapists (OTs) are not commonly involved. Objectives: The purpose of this scoping review was to explore the role of occupational therapy for women's health issues in outpatient settings within the literature by identifying the needs of this population, effective interventions, and gaps within the literature. Methods: The Levac and colleagues' (2010) framework guided this scoping review. Four authors searched 6 electronic databases for literature addressing the role of occupational therapy in women's health. Two authors reviewed each database and independently screened papers, then conducted data extraction for selected papers. Results: Title and abstracts of 5538 articles were screened and a total of 35 articles met the inclusion criteria. Eighteen studies focused on breast cancer rehabilitation, eleven studies addressed on maternal health, one study on chronic pelvic pain, three studies on violence against women, and three focused on HIV for women. The role of occupational therapy and interventions delivered by OTs varied across populations but all addressed participation in occupation holistically considering the person, environment, and occupation. Conclusions: The findings suggest there is evidence for OTs to play a role within these women's health issues. There is a need for more evidence for the OTs role and specific interventions within these populations, and areas like reproductive and maternal health.

Key words | mots clés : *Advocacy, Evidence-based practice*

Tuesday 12:05-12:30
Paper presentation: Adult | Mental health
Changes in Veteran identity during the military-civilian-transition
Kimberly Ritchie Queen's University, Heidi Cramm Queen's University, Maya Eichler Mount Saint Vincent University, Deborah Norris Mount Saint Vincent University, Linna Tam-Seto Queen's University, Megan Edgelow Queen's University, Shannon Hill Queen's University

Introduction. Military identity is shaped by the experiences of military service that are unlike those of civilians, creating a gap between military and civilian identities. Military to Civilian Transition (MCT) involves a complex process of leaving military service and re-establishing oneself as a civilian. This process can create an identity conflict with potentially negative impacts on mental health. Objectives. To longitudinally describe changes to identity among Veterans during MCT. Methods. In-depth, semi-structured interviews were completed at two time points: 6 months pre-release and 6-12 months post release. Data analysis consisted of grounded theory techniques to code, categorize and develop themes. Results. Results from English-language participants at T1 (n=75) and T2 (n=70) reflect a diverse range of experiences, including relinquishing a military identity, sorting out a new sense of self and purpose, and re-establishing oneself in the civilian world. A lack of control over release, such as an unexpected

medical release, negatively impacted participants sense of self, resulting in feelings of failure in not achieving the military career they had envisioned. For some, leaving the military also meant losing the external symbols (uniform, medals, ribbons) of their community and their a sense of belonging or meaning, while fearing absorption into a civilian culture that doesn't understand their past service. Conclusion. This qualitative longitudinal study provides new information about the experiences of military members and Veterans during MCT. The findings from this study resonate strongly with constructs related to meaning, purpose, and belonging and can inform occupational therapist assessment and intervention.

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

Tuesday 12:05-12:30
Paper presentation: Not applicable | Occupational therapy education
Un programme novateur pour reconnaître la contribution des superviseurs
Caroline Borris CNFS-Volet Université d'Ottawa

Introduction : Le recrutement et la rétention des superviseurs de stagiaires en ergothérapie constituent un défi de taille. Les mesures de valorisation mises en place par les associations ou les divers milieux sont inconstantes. Le insérer l'auteur a développé le insérer le nom du programme pour répondre à cette problématique. Objectifs : Une recherche évaluative a permis de colliger des informations sur l'appréciation des superviseurs inscrits au programme et des diverses parties impliquées. Approche : Une approche mixte a été privilégiée. 29 superviseurs ont complété un sondage en ligne entre le 14 janvier et le 15 février 2019. 3 partenaires et les concepteurs ont participé à des entretiens téléphoniques ou en présentiel. Résultats : 83 % des superviseurs ont indiqué que leur expérience était reconnue pour la première fois. 84 % des répondants avaient un niveau de satisfaction élevé envers le programme (excellent ou très bien). Les superviseurs ont souligné un accroissement de leur motivation à développer leurs compétences pour encadrer des stagiaires. Les partenaires interrogés reconnaissaient la valeur ajoutée du programme et le besoin d'avoir une base de données centralisées. Plusieurs aspects positifs et quelques défis ont été relevés par les concepteurs du programme. Conclusions : La valorisation professionnelle, la visibilité du travail et de l'engagement constituent quelques impacts positifs du programme ÉCCU. Ce dernier présente une option efficace pour reconnaître équitablement la contribution des superviseurs dans différents milieux de stage au Canada.

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

Tuesday 12:05-12:30
Paper presentation: Not applicable | General/Professional issues/Practice
Racism in Occupational Therapy: "Just Something You're Always Aware Of"
Stephanie Bizzeth Dalhousie University, Kaitlin Sibbald Dalhousie University, Tara White Dalhousie University

Rationale: With the resurgence of the Black Lives Matters movement in the summer of 2020, CAOT declared, "No silence in the face of inequality and injustice" and committed to taking on "racism, oppression and hatred" (CAOT, 2020). This paper is the first research account of experiences of racism

within occupational therapy in Canada. Objectives: To examine experiences of racism, its toll on therapists, and how they respond. Approach: Exploring racism at micro-, meso-, and macro-levels, in-depth qualitative interviews were conducted with 10 self-identified racialized therapists from across Canada. Interviews explored mechanisms of racism and implications for participants, as well as responses and ways of coping. Results: Participants detailed 'microaggressions', overt hostility, isolation, exclusion, institutional racism and how systemic racism is built into the culture of the profession. The toll was pervasive. Therapists were exhausted, angry, despairing: "(sigh) I just kind of wanted to quit." In response, some sought interpersonal supports, some sought institutional interventions, but most commonly, therapists found ways to explain or rationalize their experiences, including reframing, relativizing, and individualizing. Stances often differed depending on whether the source of racism was a client or a colleague. Conclusions: In professional contexts, racialized therapists repeatedly encounter instances that, intentionally or inadvertently, convey disregard and contempt. Professional organizations, educators and clinical colleagues need to challenge systemic power relations that uphold racism, institutionalize systems of mutual support and mentoring for racialized therapists, and help all occupational therapists and students develop the analysis and skills to respond effectively to racism at all levels.

Key words | mots clés : *Occupational justice, Theory*

Tuesday 1:30-1:55
Paper presentation: Adult | General/Professional issues/Practice
Priorities at end-of-life: A longitudinal study into occupational engagement
Julie Brose Flinders University, Deirdre Morgan Flinders University, Eileen Willis Flinders University

Introduction: Growing numbers of Canadians are living with advanced cancer for longer periods of time. The largest concern of people who receive medical assistance in dying in Canada is the "loss of ability to engage in meaningful life activities" (Health Canada, 2020, p.32). Identifying and meeting occupational needs should be an integral part of palliative and end of life care, however in many cases, it is not considered. Objectives: This study explored the lived experience of occupational engagement for adults living with advanced cancer. Their experiences were prospectively tracked over time in order to understand their experience of occupational engagement and how this changed as they approached death. The Model of Human Occupation shaped the inquiry into motivations behind occupational engagement at end of life for these adults. Methods: This prospective study involved 8 adults (aged 18-64) living with advanced cancer who participated in multiple in-depth interviews regarding their experiences of occupational engagement. A phenomenological approach informed data analysis. Results: The findings of this study indicate that adults living with advanced cancer want to continue engaging and investing in meaningful occupations, roles, and relationships. The environment can be a barrier or facilitator, impacting on continued occupational engagement. Adaptation to constant change is facilitated by continued engagement in daily occupations. This study contributes to the Model of Human Occupation regarding people living with advanced cancer. Conclusions: Occupational therapists are uniquely positioned to address priorities of people at end of life. The Model of Human Occupation can be used as a framework to facilitate continued occupational engagement.

Key words | mots clés : *Models, Palliative care*

Tuesday 1:30-2:30
Sponsored session: |
ACOTUP sponsored session: Advancing a National Agenda for Occupational Therapy Education Research in Times of Transformation
Elizabeth Anne Kinsella, Cori Schmitz, Rosemary Lysaught, Tal Jarus, Aliki Thomas, Deborah Cameron, Kirsten Smith, Mary Roduta Roberts, Diane MacKenzie, Rose Martini, Margo Paterson & Andrea Duncan

2020 has been a year of unprecedented change and disruption, fundamentally transforming our perspectives and priorities in all areas including educational research and practice. The aim of this session is to: a) discuss a variety of recent initiatives aimed at advancing the epistemic community of occupational therapy educational researchers in Canada, and b) brainstorm together about priorities, and an educational research agenda, that supports the profession through this time of radical transformation. This session begins with a brief overview of the emergence of an Occupational Therapy Research on Education Movement and discusses a range of synergistic efforts to build support at the national and international level such as: the evolution of an OT educational research Community of Practice; draft of a World Federation of Occupational Therapists statement on education research; new Canadian Occupational Therapy Foundation funding for education research, and a new CAOT Conference stream in education research. This is followed by a review of collaborative initiatives that advance the national educational research agenda such as: research into fieldwork accommodations for OT students across Canada, a national study on applications of evidence-based practice by new graduates, a study of covid-19 and OT education at Canadian Universities, and OT Fieldwork Learning with Indigenous Populations across Universities. There are a range of other important educational research agendas on the Canadian Landscape, as well as emergent areas that require our attention. The second part of this session will engage participants in collaborative dialogue and brainstorming concerning educational research priorities in this time of transformation.

Key words | mots clés :

Tuesday 1:30-1:55
Paper presentation: Not applicable | Occupational therapy education
Experts by experience: Service user involvement in occupational therapy education
Stephanie LeBlanc-Omstead Western University

Introduction: Mental health service users have been increasingly recognized as "experts by experience", with a rich source of individual and collective knowledge to offer in the education of health professional students - a practice referred to hereafter as service user involvement (SUI) (Happell & Roper, 2009; Rhodes, 2012; Sapouna, 2020). Despite growing recognition of the importance of SUI in a range of contexts, there is currently a shortage of Occupational Therapy (OT)-specific research in this area (Arblaster, 2015). Objectives: The aim of this doctoral research was to deepen understandings of the complex and varied experiences of service user educators involved in OT education, and to examine the ways in which SUI is currently being conceptualized, organized, and implemented within OT education programs in Ontario. Methods: Using post-critical ethnography (Noblit, 2004), the practice of SUI in the context of four OT programs was examined. In-depth, semi-structured interviews were conducted with 9

service user educators and 5 OT course instructors, and more than 60 hours of participant observation and experiential activity were documented. Practice Implications: By shedding light on SUI practices in OT programs in Ontario, this research contributes novel insights towards the development of educational practices that foreground service users' knowledge within health professional education. Conclusions: Our professional embrace of client-centered practice, collaboration, partnership, and social inclusion, offer an ideal foundation for supporting SUI in OT (Wright & Rowe, 2005). This presentation will engage a discussion around important considerations and possibilities for involving mental health service users in OT education.

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

Tuesday 1:30-1:55
Paper presentation: Older Adult | Primary care/Primary healthcare/Population health
Older Adults' Experiences of Negotiating Meaningful Occupational Engagement in Neighbourhoods
Carri Hand University of Western Ontario, Debbie Laliberte Rudman, Colleen McGrath, Jami McFarland, Katherine Stewart, Jason Gilliland

Introduction: Older adults often face challenges engaging in meaningful occupations in their neighbourhoods, often tied to place-based barriers and changes including neighbourhood decline or gentrification. Objectives: Drawing on findings from an ethnographic study exploring older adults' lives in their neighbourhoods, we explore the contextually situated experiences of older adults as they engage in community occupations, focusing on social participation and leisure occupations, and the ways in which older adults experience inclusion and exclusion in their neighbourhoods. Methods: We employed an ethnographic methodology with 38 older adults living in two neighbourhoods in a mid-sized Canadian city. Participants engaged in narrative interviews, go-along interviews, activity-space mapping with follow-up interviews, and photo elicitation interviews. We analyzed data using thematic and data visualization techniques. Results: Neighbourhood changes were often connected to decreases in social and leisure engagement by participants, sometimes tied to loss of spaces for informal social participation. Available occupational opportunities were often perceived as for 'seniors', an identity many participants rejected. Participants also experienced exclusion from sites of social and leisure occupations, often based on social identities related to income, length of residency in the neighbourhood, language, gender, ability, and marital status. Participants also actively negotiated places and relationships to create occupational opportunities and sense of belonging. Conclusions: Our findings highlight the need to foster diverse, inclusive neighbourhood opportunities for occupational engagement among older adults. Collaboration is needed to identify, develop and advocate for such opportunities, such as developing local spaces into places of informal occupational engagement or improving existing occupational opportunities.

Key words | mots clés : *Community development, Occupational science*

Tuesday 1:30-1:55
Paper presentation: Child | Mental health
What's important for youth mental health recovery? Let's ask them.

Jessica Tang University of British Columbia, Michele Garceau University of British Columbia, Skye Barbic University of British Columbia

Introduction: Canadian youth aged 12-25 experience the highest incidence of mental disorder across all age groups (10-20%) (MHCC, 2013). To implement recovery best-practices, it is critical to understand how recovery is conceptualized by young Canadians (Hetrick et al., 2017). Objective: To understand the meaning of recovery, common recovery goals, and important factors to recovery among youth. Methods: We collected survey data from youth aged 15 to 25 [n=708, 53% female, mean age: 20.6 years (SD=3)] accessing youth services in six communities across our province. Data included demographics and responses to three open-ended questions about recovery. We used descriptive statistics to describe the participants and thematic analysis to identify themes within the survey responses. Results: Young people described recovery as a process of "taking the steps towards pushing forward" to "feel like myself again" and "live independently and function in society". Common recovery goals included (1) participation in work/school/leisure, (2) establishing stable housing and income, and (3) self-management of health and well-being. External factors influencing recovery included access to culturally sensitive and age appropriate health services, social support, exercise, stable housing/finances, sleep, substance use, and food security. Internal factors included motivation to establish habits and routines, self-acceptance/appreciation, confidence, self-efficacy, and positivity. Conclusions: Occupational therapists play a critical role in helping youth with mental illness achieve the full range of their recovery goals. Understanding youth recovery perspectives will help occupational therapists align their practice with youth recovery needs.

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

Tuesday 1:30-1:55
Paper presentation: Older Adult | Health and well-being
Remodeler sa vie® : un premier plan d'implantation québécois!
Marie-Hélène Lévesque Université de Sherbrooke et Centre de recherche sur le vieillissement du CIUSSS de l'Estrie-CHUS, Nadine Larivière Université de Sherbrooke et Institut universitaire de première ligne en santé et services sociaux du CIUSSS de l'Estrie-CHUS, Johanne Filiatrault Université de Montréal et Centre de recherche de l'Institut universitaire de gériatrie de Montréal, Valérie Poulin Université du Québec à Trois-Rivières et Centre interdisciplinaire de recherche en réadaptation et intégration sociale, Véronique Provencher Université de Sherbrooke et Centre de recherche sur le vieillissement, CIUSSS de l'Estrie-CHUS, Dominique Giroux Université Laval et Centre de recherche du CHU de Québec, Émilie Lagueux Université de Sherbrooke, Nathalie Delli-Colli Université de Sherbrooke et Centre de recherche sur le vieillissement du CIUSS de l'Estrie-CHUS, Yves Couturier Université de Sherbrooke et Centre de recherche Charles-LeMoyne-Saguenay-Lac-Saint-Jean sur les innovations en santé, Mélanie Levasseur Université de Sherbrooke et Centre de recherche sur le vieillissement du CIUSSS de l'Estrie-CHUS

Introduction Le vieillissement en santé est une importante cible pour favoriser la santé des aînés nécessitant davantage d'interventions préventives. Récemment traduit et adapté au Québec, le programme Remodeler sa vie® (Lifestyle Redesign®) est une intervention d'ergothérapie préventive visant le développement de modes de vie sains et signifiants pour les aînés. Actuellement, le programme n'est pas implanté en clinique et il n'existe aucun plan d'implantation afin de soutenir son

intégration dans la pratique. Objectifs Explorer la préimplantation du programme Remodeler sa vie® en identifiant des actions à entreprendre en vue d'une implantation réussie. Méthodes Une recherche-action a été utilisée pour faciliter le transfert des connaissances et identifier les actions requises à l'implantation du programme, et ce, lors de 11 groupes de discussion réalisés auprès de 58 partenaires-experts (ergothérapeutes, gestionnaires et partenaires communautaires). Les groupes de discussion ont été animés à l'aide de guides d'entretien semi-structurés, puis analysés de façon qualitative par le biais d'une analyse de contenu thématique. Résultats Afin d'implanter le programme, un plan opérationnel comportant sept axes prioritaires d'implantation, 17 objectifs ainsi qu'une série d'actions à entreprendre sur deux ans a été développé. Alors que les premiers axes reposent principalement sur des objectifs individuels (ex. : s'approprier le programme), les axes subséquents sont davantage collectifs et ont pour but la planification, l'expérimentation et l'évaluation du programme. Conclusions En proposant pour la première fois un plan d'implantation détaillé et collaboratif, cette étude contribuera à l'intégration d'approches préventives permettant de mieux soutenir le vieillissement en santé des Québécois âgés.

Key words | mots clés : *Community development, Occupational science*

Tuesday 1:30-1:55
Poster defense: Older Adult | General/Professional issues/Practice
The professional identity of retired occupational therapists
Jessica Kalkat, Andrea Mandzuk, Samantha Dame, Natalie MacLeod Schroder

Introduction: Occupational therapists spend their career developing a professional identity, which provides a sense of connection to the profession and contributes to their sense of self. Retirement affects this sense of belonging, potentially disrupting this identity. There is limited research exploring the impact of retirement on occupational therapists' professional identities. Objective: To explore the experiences of retired occupational therapists and the impact of retirement on professional identity. Methods: This study used a qualitative descriptive design to generate a descriptive summary of retired occupational therapists' experiences (Sandelowski, 2000). Three retired occupational therapists participated in semi-structured, internet-based interviews. Using qualitative content analysis, data derived codes were developed and modified until consensus was reached among researchers, and then organized into categories to describe participants' responses. Results: Three categories emerged. The nature of transition to retirement affects professional identity in retirement describes the impact of a planned versus unplanned retirement on identity. "I can't call myself an OT, but I am" describes the value of professional title, and the threats to professional identity when title is relinquished. Identity continuity in retirement describes how participants maintained their identity through using their skills and perspectives differently, taking on new roles, and maintaining connections with the occupational therapy community. Conclusion: Professional identity of occupational therapists continues in retirement. The ability to maintain professional identity appears related to finding new ways to express identity. Preparing occupational therapists for retirement and exploring ways to maintain title and connections to the profession may improve the transition for future retirees.

Key words | mots clés : *Advocacy, Teaching/education*

Tuesday 1:30-1:55
Paper presentation: Adult | Mental health
Promoting Occupational Therapists' Role in Suicide Risk Assessment and Intervention
Mairi McGuire The Ottawa Hospital, Pooja Vyas The Ottawa Hospital, Tilly Martin The Ottawa Hospital, Crystal Morris The Ottawa Hospital

Introduction/rationale: This year, Ontario's coroner put forth a zero-suicide goal, motivating a hospital to examine its practices. We, as Occupational Therapists (OT), see a role for our profession in assessing and intervening with patients who are at risk of suicide based on our functional focus and understanding of the importance of engaging with meaningful occupations. Therefore, OTs from different disciplines at hospital formed an initiative with the aim of identifying gaps within their policy to determine how OTs can incorporate assessing for and intervening in suicide prevention within our practice. Objectives: To provide recommendations that promote the role of OT and provide a process for suicide assessment and intervention. Methods/approach: The "Suicide Safety Initiative" was established which comprised of OT professional leaders and OTs who were interested in the subject and/or had experience intervening in suicide at the hospital. The initiative met regularly to explore the topic and provide recommendations for moving forward. An environmental scan and literature review were completed to inform recommendations. Practice implications/results: Based on information gathered, a set of eleven recommendations has been put forth to the hospital's occupational therapy education committee with the aim of incorporating regular training for suicide assessment/treatment for OTs at the hospital and to promote the suicide prevention process within daily practice. Conclusions: Given our focus on the importance of meaningful occupations and function, we as OTs are well positioned for suicide assessment and intervention. Our recommendations aim to assist and support occupational therapists and occupational therapy assistants to identify clients at risk of suicide and take steps to prevent suicide in all practice settings.

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

Tuesday 2:05-2:30
Poster defense: Child | Mental health
Head Banging and Helmets: Decreasing risk and Enabling Occupation
Mary Glasgow Brown BC Children's Hospital

Introduction: Head banging behaviour can occur among children with cognitive impairment and neurological impairments (e.g. Autism) long beyond the toddler years of their peers and can be further impacted by environmental stress. Does this cause concussions or other brain injury? The risk of concussions or possible chronic traumatic encephalopathy can severely limit a child's participation in occupations at home, school and the community. Helmets may decrease possible impact of head banging and enable access to occupation that would otherwise be too risky but may be expensive, intimidating to choose and hard to keep on. Objectives Enable occupational participation of children who may be excluded due to "dangerous behaviour" by decreasing risks associated with head-banging. Approach- Evidence and assessments regarding concussions and chronic traumatic encephalopathy will be discussed relating to this population. Practical helmets options, alternative options and how to draw on team members for effective helmet plans will also be outlined. Practice implications Occupational

therapists will be more confident assessing possible risks associated with head banging, exploring solutions to help decrease risks, and enabling children to participate in occupations wherever they are. Conclusions Head banging is a complex behaviour that may be dangerous and impair participation amongst in childhood occupations for some children who are already at greater risk amongst pandemic restrictions. Occupational therapists can offer knowledge and practical recommendations to decrease risks and enable participation in meaningful occupation for children and their families.

Key words | mots clés : *Autism, Brain injury*

Tuesday 2:05-4:00
Hands-on learning session: Non-specific | Occupational therapy education
Redressing the null curriculum in occupational therapy education
Hiba Zafran McGill University, Marie-Lyne Grenier McGill University

Introduction. Canadian occupational therapy (OT) educational programs do reproduce colonial, racist and ableist harms. One way we do this is through the content of what we teach that adhere to ideologies of White supremacy (Grenier, 2020), who teaches our content, and with which sources and representations of knowledge. All this conveys implicit and explicit messaging about norms, practices and values. The null curriculum (Eisner, 1994), focuses on what and who is not present in our curricula, and how this teaches through absence (Fricker, 2008). Objectives. Participating OT educators will (1) define and describe the implications of a null curricula, and (2) apply intersectionality to OT teaching materials, in order to (3) design more inclusive and socially accountable formal curricula. Description of session. This 90-minute workshop will begin with a 25-minute presentation on the null curriculum and intersectionality (Crenshaw, 2016), and the link to health equity and social accountability (Clithero et al, 2017). Concrete considerations and strategies for teaching will be proposed, accompanied by an illustration of how to identify and redress a null curriculum in a critical manner that is aware of the risk of tokenism (Stewart, 2017). This will be followed by 25-minutes activity where participants are required to bring their teaching materials (a lecture, a course description/outline, a course reading list) in order to directly apply the presented strategies to their own content and courses. This will be followed by a 40-minute discussion where insights and examples are shared and problem-solved together, challenges are identified, key messages are collectively generated, and educators will set an action plan for redressing their null curricula in their fall 2021 teaching Practice implications. What we do not teach matters as much as what we do teach. This workshop provides an opportunity for educators to review and revise their teaching materials to be inclusive and equity-serving. In so doing, minority students can see themselves reflected in the profession, which supports their sense of belonging. Conclusion. Health inequities are maintained when under-served peoples are not included in OT curricula in critical ways. Redressing the null curriculum is one approach for socially accountable education.

Key words | mots clés : *Clinical reasoning, Theory*

Tuesday 2:05-2:30
CSOS poster: Community/Population | Chronic conditions
Exercise perceptions following a dance program for people with stroke

Caitlin Elmslie University of Toronto, Lara McCallion University of Toronto, Kara Patterson University of Toronto and Toronto Rehabilitation Institute

Rationale: Literature demonstrates the benefits of adapted dance classes, however perception of dance as exercise requires further exploration. Personal perceptions of exercise are important in ensuring physical activity can be meaningfully translated into daily life. If dance classes are perceived as enjoyable forms of exercise, promoting these classes may increase exercise engagement among the stroke population. Dance can then be used as both a rehabilitation tool, as well as a leisure activity that participants can continue post-intervention to enrich occupational repertoires. Objectives: This study examines perceptions of exercise in people with chronic stroke after participating in an adapted dance program, as well as the impact of this dance program on occupational repertoires. Approach: Interview response data was collected from 18 participants after completing a 10-week adapted dance program created to examine the feasibility of dance as an intervention to improve gait and balance in individuals with chronic stroke. Data analysis follows the interpretive description approach through which interview transcriptions are coded using NVivo to identify patterns and themes related to perceptions of dance as exercise. Practice implications: The information gained from this study may illustrate the value of meaningful occupational engagement for individuals with chronic stroke and broaden the clinical understanding of prescribing dance as exercise. Conclusions: Findings of this research may lead to a better understanding of dance as a rehabilitation tool for people with chronic stoke, and how their perceptions of dance and of exercise may impact their development of occupational repertoires.

Key words | mots clés : *Occupational science, Stroke*

Tuesday 2:05-2:30
Poster defense: Adult | Mental health
Development of a clinician manual for suicide prevention
Charlotte Larry The Ottawa Hospital, Keri-Lynn Robinson The Ottawa Hospital

Introduction: Current practice within initial assessment of injured workers is to administer the PHQ-9 or PHQ-4+1 to screen for suicide risk. As Occupational Therapists working with a vulnerable population, we frequently found injured workers reporting positive indicators for suicidal ideation, with no protocol in place to meet their mental health or safety needs. Studies have demonstrated use of the PHQ for suicide risk to be often unclear, leaving clinicians feeling unprepared to manage suicide risk. Objectives: The primary objective of the initiative was 1) optimize clinicians' ability to identify suicidal ideation, warning signs, and risk factors; 2) educate clinicians on how to confidently perform risk assessment and provide a safety plan as a best-practice intervention; and 3) improve clinicians' awareness of professional responsibilities around reporting suicidal risk and behavior. Methods: We created a user-friendly and simplified manual that included the Columbia Suicide Severity Rating Scare (C-SSRS) to risk stratify and triage injured workers who report suicidal ideation, adapted to resources available within our organization. Practice Implications: Goals of this initiative include improved patient safety and clinician confidence in managing clients with suicidal ideation and intent across our organization. Conclusion: This is the first multi-disciplinary effort adapting a suicide risk stratification and triage tool in injured workers. This manual serves as a mental health and suicide crisis resource that is readily available for

clinicians to disseminate to workers. Clinicians across the country can utilize this manual as a template for their location and practice-specific needs to assess and triage suicide risk.

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

Tuesday 2:05-2:30
Paper presentation: Older Adult | Health and well-being
Young and Older Adults Engaging in Co-occupation in Intergenerational Living
Rachel Gorjup, Carri Hand, Debbie Laliberte Rudman

Introduction: Intergenerational housing programs in which young and older adults live together have been implemented worldwide, yet research exploring these programs is sparse. An important component of intergenerational living seems to be the activities that young and older adults engage in together. Objectives: Taking a lens of co-occupation, that is everyday occupations performed together by two or more people, this study explored how university students and older adults, living together in a retirement home, enacted co-occupations and the factors that shaped these co-occupations. Methods: We conducted a focused ethnography with students and older adults who engaged in co-occupations such as music-related programs, meals, and informal occupations. We completed semi-structured interviews with ten participants (two students and eight older adults) and observations and casual conversations with approximately 40 participants. We applied thematic analysis to generate findings. Results: Engagement in co-occupation was central in this intergenerational program, as were opportunities for participants to shape the co-occupations, leading to a diversity of experiences. Participants played diverse roles during co-occupation, such as asserting different levels of ownership over the occupation. Students and older adults formed mutually beneficial relationships, ranging from close to playful to acquaintance-type, that supported and were supported by engaging in co-occupations. Conclusions: These findings point to the need to attend to meaningful co-occupation within intergenerational programs and the conditions that can support such engagement.

Key words | mots clés : *Community care, Occupational science*

Tuesday 2:05-2:30
Poster defense: Non-specific | Advocacy /Change agent
Health and Human Service Professions- Perspectives From Indigenous Professionals
Alicia Ditty University of British Columbia, Vinci Lai University of British Columbia, Madeline Elder University of British Columbia, Katie Lee Bunting University of British Columbia, Yael Mayer University of British Columbia, Hali McLennan University of British Columbia, Ashley Quinn University of British Columbia, Tal Jarus University of British Columbia

Introduction: Indigenous Peoples make up 5% of Canadian population, however, only 1.2% of health professionals identify as Indigenous. Various studies have reported the benefits of diversifying the health professions. The barriers and facilitators to the inclusion of Indigenous Peoples in these professions must be identified. Objective: In response to the Truth and Reconciliation Commission (TRC) of Canada's Calls to Action, the purpose of this project is to identify and understand the barriers and facilitators Indigenous professionals face in achieving and maintaining a position in Health and human

service (HHS) professions. Approach: A qualitative research design will be adopted in order to provide rich understandings of Indigenous professionals' experiences. Sharing circles, facilitated by Indigenous and non-Indigenous facilitators, will be used to collect their individual perspectives. Reflexive thematic analysis and member checking will occur to develop themes from participant experiences. Practice Implications: The identified facilitators and barriers experienced by Indigenous HHS professionals can be used to analyze current policies and procedures within both HHS education and practice. These results can instigate change to enhance inclusion and justice for Indigenous Peoples in the HHS professions. Conclusions: This study is the first step to addressing the TRC Canada's Call to Action to increase and retain the number of Indigenous health professionals. Results will identify the potential facilitators and barriers Indigenous professionals face. This may act as a catalyst for uncovering further changes to be made regarding attitudes, procedures, and practices present in HHS professional education and practice that limit the inclusion of Indigenous Peoples.

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

Tuesday 3:00-4:00
Extended discussion: Older Adult | General/Professional issues/Practice
Profiling Occupational Therapy Services for Seniors: Equity and Ageism Considerations
Sachi Wijekoon University of Toronto, Barry Trentham University of Toronto, Christie Brenchley Ontario Society of Occupational Therapists, Barbara Cawley VHA Home Health Care, Catherine Donnelly Queen's University, Mary Eagan University of Ottawa, Lori Letts McMaster University, Colleen McGrath Western University, Bianca Stern Centre for Aging and Brain Health Innovation, Aaron Yuen

Introduction: While occupational therapists recognize the value of their work with seniors, efforts to profile the benefits of occupational therapy requires reframing to ensure that we do not adopt ageist messaging that has influenced traditional communication tactics. Ageist messaging reinforces limiting stereotypes that views old age primarily in terms of individual loss, physical decline, and dependence while underplaying the diversity of lived experiences and the impacts of the social determinants of aging. While such messaging may serve to create a need for specialized occupational therapy services, it neglects to adequately describe aging as a time of transition, growth and ongoing occupational development. Such is the dilemma of professional organizations tasked with profiling the work of occupational therapy with seniors. In response the Ontario Society of Occupational Therapists, under the leadership of its Seniors Advisory Council, developed the En-AGE Portal Project. This public facing portal includes ten modules that describe key later-life occupational transitions experienced by seniors and highlights how occupational therapy can bring value. Resources, innovative practices and research evidence of interest to seniors, policy and decision makers, and occupational therapists are provided. This session shares the experience of developing the En-AGE Portal Project as a stimulus for dialogue on ways to profile the important work of occupational therapists with seniors. Objectives: Presenters will facilitate discussion on ways to critically examine strategies that consider seniors as collaborators in creating profile messaging; the social determinants of health, including issues of equity and inclusion across the of aging process; and the value of occupational therapy in supporting later-life occupational transitions.

Session description: The session begins with an overview of the En-AGE Portal Project. Small facilitated groups will then discuss critiques of exemplars. Strategies for creating anti-ageist and age-positive occupational therapy profile messaging will then be shared amongst participants.

Practice implications: Occupational therapy practitioners can apply workshop outcomes in the promotion of their services for seniors. Conclusions: While the value of occupational therapy for seniors may be clear to practitioners, decision makers and end-users are in need of accessible information that considers issues of diversity, inclusion, and equity.

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

Tuesday 3:00-3:25
Poster defense: Child | General/Professional issues/Practice
Developing screen time guidelines for children and youth with autism
Janice Chan, Natasha Kuzyk, Mor Cohen Eilig, Armansa Glodjo, Tal Jarus, Yael Mayer

Introduction: Screen-based usage among children and youth with autism spectrum disorder (ASD) has increased significantly over the past decade. Consequently, this may have potentially detrimental effects on their health and development. Current screen time guidelines exist for typically developing children and youth, however these guidelines do not address the specific needs of children and youth with ASD. Objectives: To develop population specific guidelines that are agreed upon by experts and stakeholders. Methods: Using the Delphi method, expert researchers, clinicians, teachers, and parents who have experience working with and/or caring for children and youth with ASD will be invited to complete a series of two to three surveys. In each round, participants will have to rate their agreement on a series of statements to be included in the guidelines. The consensus level will be set to 75%. Results: We anticipate that a 75% consensus level will be reached amongst the different individuals responding to the surveys. Findings will highlight which screen time guidelines to incorporate in best practices for children and youth with ASD. Conclusion: Providing guidance to parents and clinicians regarding the use of screen time with children with ASD is timely. This will include the best ways to use screen time, benefits and limitations of screen time, and strategies on how to mediate screen time conflicts. The agreed upon guidelines could be the stepping stones for clinical interventions for screen time overuse of children and youth with ASD, addressing the screen time crisis that many families are experiencing.

Key words | mots clés : *Autism, Evidence-based practice*

Tuesday 3:00-3:25
CSOS paper: Community/Population | Health and well-being
Finding meaning and belonging: Exploring newcomers' recreation experiences through photos
Heidi Lauckner Dalhousie University, Tara White Dalhousie University, Karen Gallant Dalhousie University, Susan Hutchinson Dalhousie University, Mary Akbari Dalhousie University

Introduction. Feelings of social isolation can accompany newcomers' integration into their new Canadian communities. Involvement in recreation may ease newcomers' settlement process; however there is limited knowledge of issues impacting their participation. Further, recreation itself may have varied meanings across cultures. Objectives. This research aimed to visually capture culturally-relevant

newcomer recreation opportunities and to document key priorities, barriers to accessing, and meanings of recreation for newcomers. Methods. This qualitative study used photo elicitation methods grounded in community-based research methods in two Canadian communities (one urban and one rural). With the assistance of community organizations, 6 emerging leaders from newcomer communities recruited participants. Participants who had immigrated to Canada between 4 months to 5 years ago from over 13 different countries participated in the training, submitted photos of meaningful free-time activities, and shared their photos through focus group discussions (n=43). Interviews with newcomer emerging leaders (n=5) were also conducted. Photo installations were compiled and shared at local community organizations. Results. The overarching theme that emerged was developing a sense of belonging through a series of small encounters. Four sub-themes included: continuity with, and freedom from past activities and places; being in and connecting with nature; staying physically and mentally well; and connecting and learning with others. A variety of barriers and facilitators influenced recreation opportunities. Notably, participants found meaning in the process of taking photos and sharing them with other through the project activities. Conclusion. Recreation experiences offered opportunities for newcomers to experience doing, being, and belonging through diverse occupations.

Key words | mots clés : *Community development, Occupational science*

Tuesday 3:00-3:25
Poster defense: Child | Primary care/Primary healthcare/Population health
Parent and child perspectives on communication tools for weight-related discussions
Charlotte Fowlow University of Toronto, Robyn Sirkin University of Toronto, Shauna Kingsnorth Holland Bloorview Kids Rehabilitation Hospital, University of Toronto (Rehabilitation Sciences Institute and Department of Occupational Science and Occupational Therapy), Amy McPherson Bloorview Research Institute, University of Toronto (Rehabilitation Sciences Institute and Dalla Lana School of Public Health)

Rationale: Children experiencing overweight or obesity are at an increased risk for adverse health effects and psychosocial challenges due to weight stigmatization. Healthcare practitioners are well positioned to facilitate conversations that promote the development of healthy behaviours while considering the psychosocial factors, but report feeling ill-equipped to do so. Communication tools for facilitating such conversations exist, but parent and child perspectives of them have yet to be explored. Objectives: To gain the perspectives of children and parents on the acceptability and perceived value of currently available weight-related communication tools. Methods: The study will use a qualitative descriptive exploratory approach, with data collected via online focus groups with children and their parents. Recruitment will be conducted through a treatment centre for children who are experiencing medical complications due to overweight or obesity. Thematic analysis will be conducted by the research team. Practice implications: The findings will generate awareness of weight-related communication tools for a range of healthcare disciplines. The findings will inform tool effectiveness, future tool design and tool implementation protocols, with the goal of enabling children and parents to feel more comfortable discussing weight-related topics. Discussing lifestyle changes in children without stigmatizing them will promote positive psychosocial wellbeing and occupational engagement, and promote social and occupational justice against weight bias in healthcare provision. Conclusions: Stakeholders' perspectives of the communication tools will help enable positive weight-related discussions with children, informing clinical practice and future research.

Key words | mots clés : *Evidence-based practice, Obesity*

Tuesday 3:00-3:25
Sponsored session: |
Economic Evidence Clearinghouse: A new initiative to advocate for occupational therapy services
Andrew Freeman, Nadine Larivière and Josée Seguin

Strong agreement exists within our profession in Canada and elsewhere about the need for economic evidence to support and promote occupational therapy services. In contexts in which competition exists for available resources, not only is it necessary to demonstrate that occupational therapy makes a difference, but also that it makes economic sense. One initiative that is currently being developed is CAOT's Economic Evidence Clearinghouse, which seeks to advance the following goals:
(1) Rigour: that the economic evidence for the added value of occupational therapy services is solid and continues to evolve;
(2) Engagement: that the members of the profession can effectively engage with the economic evidence; and
(3) Advocacy: that the members of the profession can effectively communicate its economic evidence to relevant stakeholders.
In this presentation, we will outline the progress in the development of this initiative and seek participants' feedback.

Key words | mots clés :

Tuesday 3:00-3:25
Poster defense: Community/Population | Chronic conditions
Ambulatory people with incomplete spinal cord injury need better support
Bethany Hase University of British Columbia, Susanna Miller University of British Columbia, Murveena Jeawon University of British Columbia, Ben Mortenson University of British Columbia

Introduction: Individuals with incomplete spinal cord injury (iSCI) account for approximately 70% of Canadians with SCI, with the majority recovering some degree of ambulation (Noonan et al., 2012). Quantitative studies indicate that comparatively, individuals with iSCI experience higher levels of depression, fatigue, falls (Freixes et al., 2012; Jorgensen et al., 2017). However, relatively little is known about their experiences with existing programming and potential unmet needs. Objectives: 1) To explore the experiences of ambulatory people with iSCI, and 2) To identify needs, strengths and potential supports, services and programs to enable their occupational engagement in the community. Methods: This study utilizes a concurrent triangulation mixed-methods design, wherein individual interviews are the primary means of data collection, supplemented with descriptive standardized measures of function, health and life satisfaction (Creswell, 2003). Qualitative data is being analyzed thematically using Braun & Clarke's 6 step process (2013). Results: Sixteen out of an anticipated twenty participants have participated. They have an average age of 52 years and 53% are female. We identified three preliminary themes: 1) "The liminal status of iSCI" describes the benefits and trade-offs of being able to pass as someone without a disability; 2) "Structural exclusion" illustrates how the built

environment can exclude individuals with iSCI from accessing places and create negative experiences; and (3) "Lack of awareness about iSCI programs/needs" reveals limited dialogue with and lack of support for this population. Conclusions: Our findings will support service providers to improve inclusivity of programs and services for ambulatory individuals with iSCI.

Key words | mots clés : *Community care, Theory*

Tuesday 3:00-3:25
Poster defense: Community/Population | Primary care/Primary healthcare/Population health
Primary Care Occupational Therapists: Practice Patterns During the COVID-19 Pandemic
Catherine Donnelly Queen's University, Nicole Bobbette Queen's University, Amanda Mofina Queen's University, Todd T Trann Queen's University, Ashley Williams Queen's University, Jordan Miller Queen's University, Kyle Vader Queen's University, Rachelle Ashcroft University of Toronto

Introduction: Occupational therapists working in interprofessional primary care teams are well situated to support populations impacted by COVID-19, providing health promotion and prevention interventions for those most at risk. Primary care teams shifted their practices overnight to respond to COVID-19 and it is important to understand the impact of these changes on occupational therapy services. Objective: To describe the state of occupational therapy practice within interprofessional primary care teams during the COVID-19 pandemic. Methods: A cross sectional survey design was used. A web-based survey was distributed to occupational therapists working in team-based primary care clinics in Ontario during the spring and fall of the pandemic, with plans for a third distribution in the spring of 2021. The survey included 26 close-ended and six open-ended questions. Descriptive statistics were used for close-ended questions and content analysis was used to analyze open-ended questions. Results: 49 occupational therapists have consented to date. A change in practice patterns since COVID-19 was noted, with services shifting from being provide in-person to telephone. Less than half of the respondents reported to have received training for virtual care. Prior to COVID-19, providers reported mental health conditions were the most common health condition for which they provided care and this has increased after COVID-19. Conclusions: Occupational therapists have shifted practice and are playing an important key role in supporting individuals during the pandemic. There is an anticipated surge in mental health issues and teams and we can see that occupational therapists are already facing this increase.

Key words | mots clés : *Community development, Interprofessional*

Tuesday 3:35-4:00
Paper presentation: Older Adult | Health and well-being
Resilience, Older Canadians, and COVID-19: Considerations for Occupational Therapy
Brenda Vrkljan McMaster University, Marla Beauchamp McMaster University, Elizabeth Vesnaver Ottawa Health Research Institute, Renata Kirkwood McMaster University, Nicholas Dietrich McMaster University, Luciana Macedo McMaster University

Rationale: For community-dwelling older adults, the COVID-19 pandemic and associated public health measures has been challenging due to their high risk of complications if they contract the virus.

Restrictions in activities can negatively impact mobility and physical function, increase social isolation and reduce participation in life roles. Identifying factors that influence the distress experienced by older Canadians can inform strategies that optimize their health during these challenging times. Objectives: This study aims to identify factors most strongly associated with perceived level of distress during the pandemic among Canadians aged 65+ living in the community. Methods: A survey was completed online or by telephone. The outcome, Impact of Events Scale-Revised (IES-R), a measure of subjective distress, alongside self-report measures of disease, loneliness, social support, resilience, anxiety, physical activity, nutrition, and comfort with technology, were administered. Results: Of the 265 respondents who completed the survey, 44 (16.6%) had an IES-R score ($\geq$24) indicative of post-traumatic stress. Using linear regression, loneliness, low resilience (Brief Resilience Scale), anxiety (EQ-5D) and a cancer diagnosis significantly predicted IES-R score; $F(6, 548) = 25.146$, $p < .001$. The model explained 28% of the variance, which speaks to the complexity of factors involved and their potential influence on the outcome (distress). Conclusion: This study identified factors associated with high distress among community-dwelling older Canadians during the pandemic. Interviews with a sub-sample of respondents are underway to examine resilience in relation to everyday occupational engagement where the aim is to support the ongoing participation of our aging population during COVID-19 restrictions and beyond.

Key words | mots clés : *Mental health, Pandemic*

Tuesday 3:35-4:00
Poster defense: Child | Health and well-being
Learning to drive with Autism Spectrum Disorder: A scoping review
Hannah Davies Dalhousie University, Sorayya Askari Dalhousie University

rationale: A drivers' license introduces opportunities for independence and participation in society. Standardized driving instruction poses challenges for the rising population of youth with ASD who have individualized learning needs. Identifying facilitators and barriers impacting ability to learn to drive can help inform best-practice interventions to foster driving-skill development. objectives: This review aims to explore the facilitators and barriers experienced by youth with ASD while learning to drive, as well as the current driving interventions being employed to foster driving skill acquisition. approach: Five databases were searched using keywords for terms autism, driving, and learning, and hand searching was completed to retrieve potential sources. Two reviewers screened titles, abstracts, and full-texts for inclusion criteria and extracted data from relevant resources. The International Classification of Functioning, Disability, and Health framework was used to guide thematic analysis. results: Of 299 retrieved resources, 37 English-studies from seven countries were retained for the scoping review synthesis. The following main themes emerged: barriers, facilitators, and interventions specific to learning to drive with ASD, and sub-themes: body functions, personal, and environmental. Barriers are not limited to the impacts of neurodevelopmental deficits but include intra-personal, familial, and institutional factors. Facilitators to learning involve recognition of strengths and learning needs. Goal setting and collaboration prove effective as interventions to improve driving outcomes. conclusions: Individualized driving education for youth with ASD could foster increased driving safety, skill acquisition, and independence. OTs are leaders in independence and participation promotion and possess knowledge and creativity that uniquely positions them to facilitate delivery of individualized driving programs.

Key words | mots clés : *Autism, Evidence-based practice*

Tuesday 3:35-4:00
Paper presentation: Adult | Primary care/Primary healthcare/Population health
Modèle pour soutenir la pratique des ergothérapeutes en maladies rares.
Samar Muslemani Université de Sherbrooke, Julie Fortin Groupe de recherche interdisciplinaire sur les maladies neuromusculaires (GRIMN), CIUSSS du Saguenay-Lac-Saint-Jean, Annie Plourde Groupe de recherche interdisciplinaire sur les maladies neuromusculaires (GRIMN), CIUSSS du Saguenay-Lac-Saint-Jean, Cynthia Gagnon Université de Sherbrooke

Introduction : Les maladies rares touchent environ 3 millions de Canadiens. Elles nécessitent souvent un suivi de santé par une équipe multidisciplinaire. L'accès à des données probantes démontre des défis particuliers incluant le faible volume de recherche et la difficulté d'accès à des cliniciens experts. Le développement de guides de pratique permet de soutenir une pratique basée sur les données probantes, mais les méthodes actuelles pour les élaborer requièrent des niveaux d'évidences souvent absents en maladies rares. Cette situation influence négativement l'offre des soins et services pour la personne atteinte et sa famille. Objectifs : Ce projet visait à développer un processus d'extraction des connaissances pour documenter les évidences provenant de la recherche, de la pratique clinique et des patients experts. Ce processus viendra soutenir la rédaction d'outils de transfert des connaissances comme les guides de pratique. Méthodes : Le développement du processus sera illustré avec l'exemple de la création d'un guide pour soutenir la pratique des ergothérapeutes qui travaillent avec des personnes atteintes de la dystrophie myotonique de type 1, une maladie rare ayant la plus grande prévalence mondiale au Québec. Résultats : Ce projet a mené à la conception du processus d'extraction des savoirs rares qui, à son tour, a permis la création de plusieurs guides de pratique en maladies neuromusculaires. Conclusions : Le processus d'extraction des savoirs rares vient soutenir les besoins des équipes multidisciplinaires en lien avec le transfert des connaissances en leur offrant une méthode rigoureuse mais flexible pour générer des connaissances en maladies rares.

Key words | mots clés : *Evidence-based practice, Models*

Tuesday 3:35-4:00
CSOS paper: Not applicable | General/Professional issues/Practice
Naming oppression: Examining potential contributions to central occupational therapy concepts.
Elizabeth Pooley Recent graduate of Dalhousie University

Introduction: In 2020, the Canadian Association of Occupational Therapists urged their members to work towards "a fair society free of racism, oppression and hatred" (2020, para 1). Oppression is a strong word that is used less frequently in occupational therapy literature when compared to justice and rights. However, occupational therapists are naming oppressions and examining opportunities to resist, disrupt, and re-configure within practice environments (Laliberté Rudman, in press). Objectives: This presentation will encourage participants to consider key occupational therapy concepts, supported by ideas and research from occupational scholars who name oppressions (i.e. racism, ageism), facilitating conscientious action. Method: Critical interpretive synthesis (CIS) methodology was used to explore

insights from selected authors published in occupational therapy and occupational science literature (N=28 articles). Critical, reflexive, dialogic, and creative processes were used as information was interpreted (Dixon-Woods et al., 2006). Results: This CIS illustrates the relationship between oppression and occupation, reinforces the need for critically reflexive relationships, advocates using the term empowerment to indicate shifts in power, and encourages openness to multiple epistemologies. Conclusions: Increased understanding of oppression may enhance therapists' ability to "to take stock of our current behaviours and attitudes and ask ourselves what more we can do" (Canadian Occupational Therapy Association, 2020, para 1). Insights from this body of literature support occupational therapists to identify oppression in relation to occupation, to consider professional roles in light of oppression, and to engage in actions to reduce oppression.

Key words | mots clés : *Occupational justice, Theory*

Tuesday 3:35-5:00
Paper presentation: Adult | Chronic conditions
Patient and clinician perspectives on hip/knee eHealth prehabilitation education
Holly Reid, Somayyeh Mohammadi, Wendy Watson, Marie Westby, Morag Crocker, Julie Robillard, William C. Miller

Introduction: Osteoarthritis (OA) is the most common joint disorder and a leading cause of pain and disability in adults. When conservative treatment approaches are not of benefit, total hip/knee arthroplasty (THA/TKA) is recommended. Patients commonly experience presurgical anxiety which may negatively impact daily life and ultimately increase health care costs. Prehabilitation education (prehab) is one approach to improve patient experience and promote better health outcomes. However there is no universally adopted prehab guidelines for educational content that should be provided to THA/TKA patients. Objective. To explore and integrate the perspectives of patients with hip and knee OA, their caregivers, and clinicians who are working with these patients about current prehab educational content and delivery. Methods. Participants were individuals with hip (n=46) or knee OA (n=14), their family caregivers (n=16), and clinicians working with patients with hip/knee OA (n=15). In semi-structured interviews and focus groups, participants answered questions regarding barriers to accessing prehab, gaps in prehab content, learning preferences and delivery formats. Discussions were audiotaped and transcribed verbatim. Results. Four main themes were identified: 1) "falling through the cracks" discusses barriers in accessing prehab ; 2) "I never got a definitive answer" highlights the need for necessary information; 3) "Have a better idea of what's going to happen" emphasizes positive and negative aspects; 4) "a lot of people are shifting to online" describes patient's perspective on online education. Conclusion. Our findings confirm the need for prehab education and also for online prehab education. The results inform the development of prehab educational modules that focus on stakeholder input.

Key words | mots clés : *Arthritis, Orthopaedics*

Wednesday 10:00-11:00
Extended discussion: Community/Population | Advocacy /Change agent
The Impact of Physical Distancing on Individuals Living in Low-Income

Rebecca Gewurtz McMaster University, Carrie Anne Marshall Western University, Julia Holmes McMaster University, Suliman Aryobi Western University, Brooke Phillips Western University, Nazlim Bilgi McMaster University, Skye Barbic University of British Columbia, Tracy Carrier Smith Western University, Emile Tompa Institute for Work and Health,

Introduction: The experience of physical distancing policies to stop the spread of COVID-19 can vary between individuals depending on their circumstances. Individuals living in poverty may face particular challenges. There is a need to better understand how poverty shapes the experience of pandemic policies in order to guide our response. Objectives: The purpose of this session is to explore how physical distancing policies may influence the mental well-being of persons from low-income households, how these experiences evolve over time, and implications for occupational therapy practice. Session Description: We will share findings from a mixed-method longitudinal study conducted in Ontario with 111 participants from low-income households at baseline. Participants completed an online survey consisting of measures of mental health and substance use, meaningful activity engagement, boredom, hopelessness and loneliness. A subset of 27 participants were invited to participate in a qualitative interview about their experiences of physical distancing and the impact on their daily life, health and well-being. The survey and interviews were initiated in Phase I of the pandemic response. We returned to participants three months following the initial interviews. In this session, we will share findings from our research focused on the impact of the pandemic on time use and meaningful activity, as well as access to supports and resources. Delegates will be asked to reflect on the findings and consider how occupational therapists can continue to contribute to the pandemic response and recovery, with a focus on the needs of individuals from low-income households. Results: The outcome of this session will be recommendations for how occupational therapists can contribute to supporting the needs of people from low-income households during the COVID-19 pandemic and the recovery period. We will identify the contributions that occupational therapists can play in future pandemic planning to better meet the needs of those most at risk. Conclusions: The COVID-19 pandemic and physical distancing policies have disproportionately impacted people from low-income households. Occupational therapists can contribute to the pandemic response and recovery by supporting individuals to address challenges related to time-use during pandemic restrictions, as well as by improving access to needed supports and services.

Key words | mots clés : *Advocacy, Pandemic*

Wednesday 10:00-10:25
Paper presentation: Child | General/Professional issues/Practice
The dance of family engagement in school-based occupational therapy
Jennifer Kennedy McMaster University, Sandra Moll McMaster University, Cheryl Missiuna McMaster University, Jennifer Yost Villanova University, Sarah Terreberry Brock University, Wenonah Campbell McMaster University

Introduction: Family engagement is a central ideology in pediatric occupational therapy; however, the literature indicates that engaging families is particularly challenging in the school-based context. Objective: The objective of this study was to explore occupational therapists' and families' experiences of family engagement in school-based occupational therapy services and to propose stakeholder-

informed improvements to service delivery. Methods: An interpretive description design was applied. Interviews were the primary method of data collection and were analyzed using inductive thematic analysis. Results: To illustrate the complexity of the participants' experiences, family engagement was depicted metaphorically as a group dance. The findings outline how therapists' and families' capabilities, expectations, trust, communication, and emotional connections interact to impact family engagement. The impact of school and service contextual factors are also discussed. Conclusions: Improvements will require significant changes to practice. Funding agencies need to be flexible in how services are supported and how occupational therapists are paid for their time. Technology might enhance opportunities for connection and communication. The adoption of service delivery models that endorse a needs-based approach to service, rather than a 'one-size-fits-all' approach, are necessary to increase the value families place on this service. Overall, transformation in service provision is essential to improve family engagement and to increase the overall value of school-based occupational therapy services for children and their families.

Key words | mots clés : *Evidence-based practice, School health*

Wednesday 10:00-10:25
Paper presentation: Not applicable | Occupational therapy education
A virtual fieldwork course during the COVID-19 Pandemic
Anne Hunt University of Toronto, Naomi Davids-Brumer University of Toronto

Introduction. The onset of the COVID-19 pandemic resulted in significant limitations in onsite clinical learning opportunities for occupational therapy learners. Nonetheless, it remains imperative to progress students toward program completion due to the significant need for health-care workers as a result of the pandemic. As a result, our program implemented an entirely virtual placement for Year 1 students. Objectives To 1) describe the virtual fieldwork course implemented at our University in spring 2020; 2) summarize student evaluations of the course; 3) offer suggestions for future implementation. Approach. Students participated in live and on-demand experiences for a total of 90 hours. Clinical instruction was provided by two fieldwork faculty, and clinical occupational therapists from affiliated teaching sites. To support development of professional competencies, students participated in seven virtual practice-based activities: 1) online assessment and intervention courses; 2) case reviews with a clinician; 3) telehealth assessments using standardized patients; 4) SOAP style documentation; 5) CBFE-OT learning objectives and self-evaluation; 6) work-load management tool completion; 7) 'Lunch with an OT sessions'. A post-course survey evaluation was conducted. Practice Implications. Students reported that the virtual fieldwork placement was a positive learning experience. The opportunity to complete a virtual assessment with standardized patients and to interact with clinical occupational therapists were the most highly ranked learning opportunities. Conclusions. This virtual fieldwork experience supported the development of clinically relevant skills for students. While it does not replace onsite clinical learning, virtual fieldwork can provide an opportunity for foundational skill development.

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

Wednesday 10:00-10:25
CSOS poster: Older Adult | Environment

Long-term impacts of COVID-19 messaging on older adults' occupational engagement

Ruheena Sangrar University of Manitoba, Stephanie Chesser University of Manitoba, Michelle Porter University of Manitoba

Rationale: Public health messages during the COVID-19 pandemic have indicated a higher risk for older people and/or those who have multiple health conditions. Subsequent societal discourse, alongside evolving knowledge about the virus and frequently changing pandemic-related protocols, influence their everyday activities, including social participation. Objectives: This study examined how age-related COVID-19 public messaging and societal discourse has shaped older adults' occupational engagement over 6 months of the pandemic. Methods: Using a social constructionism framework, adults age 65 to 89 year were engaged in repeated semi-structured interviews at three-month intervals to share their perceptions of, as well as emotional and behavioural responses to, ongoing pandemic-related messaging. Results: Preliminary analyses identified that participants' occupational repertoires have been affected to varying degrees by concerns associated with contracting and spreading the COVID-19 virus within a dynamically evolving context. Factors that appear to shape their occupational engagement include individual approaches to media criticism and consumption, a personal or family members' presence or absence of an underlying health condition, personal and societal risk-taking thresholds, financial (in)stability, and social connectedness. Conclusions: Findings capture how the dissemination of COVID-19 information and pandemic protocols, as well as the media's sensationalization of age-related issues, can influence older adult perceptions of safety. However, the diversity in their concerns, alongside the opportunities available to engage in pre-pandemic occupations, reflects the heterogeneity of the aging experience over the course of this pandemic. Further research is needed to understand how long-term implications of pandemic-related messaging influence health and social outcomes in this population.

Key words | mots clés : *Occupational science, Pandemic*

Wednesday 10:00-10:25
Sponsored session: |
Occupational therapy research during the COVID-19 pandemic: Lessons in resilience
Lori Letts

Throughout the pandemic, researchers in occupational therapy and the Canadian Occupational Therapy Foundation (COTF) have identified ways to continue their important work, despite as well as in response to, constraints associated with distancing requirements. This presentation will highlight some ways that researchers and COTF have responded, demonstrating resilience in ensuring occupation continues to be a focus of study. COTF responded to the pandemic, by creating a Pandemic Bursary to support student occupational therapists facing financial challenges, and a Pandemic Evidence-Informed Practice Grant, which was awarded to Drs. Evelyne Durocher and Mary Egan for a project entitled: Impact of COVID-19 restrictions on long-term care and retirement home residents' health, well-being and function. While some research had to be put on hold, other researchers modified their studies to accommodate restrictions. In this presentation we will highlight research questions that have emerged from the pandemic of importance to occupational therapy, and strategies researchers have used to respond.

Key words | mots clés :

Wednesday 10:00-10:25
Poster defense: Adult | Chronic conditions
The role of rehabilitation in supporting opioid tapering: a scoping review
Tara Packham McMaster University, Courtney White McMaster University, Devon Jarrett McMaster University, Alissa Settimi McMaster University, Miranda Wiens McMaster University, Zachary Hollingham McMaster University

Introduction: One in five Canadians are affected by chronic pain. Canada has the second-highest international rate of opioid prescribing for management of acute and persistent pain. Occupational therapy and physiotherapy therapy interventions are potential non-pharmacological pain management alternatives. Objectives: We undertook a scoping review to explore and summarize current evidence for interventions including or used by occupational therapy and physical therapy in opioid tapering for individuals with chronic pain. Methods: A systematic search of the peer-reviewed electronic health databases was conducted, with subsequent data extraction and synthesis guided by scoping review methodology. Articles were included in the narrative synthesis if a) interventions within the scope of practice for occupational therapists or physiotherapists were described, or these professionals were part of interdisciplinary care and b) if opioid tapering or reduction was addressed. Results: Thirty-eight articles were included – two systematic reviews, nine narrative reviews or commentaries, two case-reports, eleven uncontrolled cohort studies, one cross-sectional study, five RCTs, four program evaluations, and four qualitative studies. Of the 28 studies reporting outcomes, 25 were in favor of rehabilitation interventions for opioid tapering. There was greater representation of interventions from physiotherapy than occupational therapy, and few papers contained substantive descriptions (e.g. dosage and duration). Conclusion: Our findings suggest there is limited specific evidence to guide therapists in their role in opioid tapering for people with chronic pain. It generally appears rehabilitation interventions are helpful in supporting the opioid tapering process, however, further research is needed to establish effectiveness for individual interventions and comprehensive rehabilitation approaches.

Key words | mots clés : *Community care, Interprofessional*

Wednesday 10:00-10:25
Poster defense: Child | Occupational therapy education
Prise du crayon : Fonctionnelle ou non ?
Véronique Rochon CIUSSSE de l'Estrie - CHUS, Mélissa Coallier, Mélissa Parent, Justine D'Amour Pascale René, Cassandra Benoit, Camille Gauthier-Boudreault, Marie-France Morin,

Introduction : L'écriture manuelle est une tâche fonctionnelle essentielle au rendement occupationnel et est enseignée très tôt dans le cursus scolaire. Lorsque des difficultés graphomotrices sont constatées, les enseignants et ergothérapeutes interviennent souvent dans le but de modifier la prise du crayon des élèves en privilégiant l'adoption d'une prise tripode dynamique. Toutefois, dans la littérature scientifique, cette prise n'est pas la seule à être répertoriée et considérée comme fonctionnelle. Objectifs : Cette étude vise à documenter les différents types de prise du crayon d'élèves de 2e et 4e année du primaire, ainsi qu'à examiner la relation entre ces différentes prises et la vitesse et la lisibilité

de l'écriture manuelle. Méthode : 57 élèves (2e année : n = 22 ; 4e année : n = 35) ont été filmés de manière à identifier les différentes prises. La vitesse et la lisibilité d'écriture manuelle ont été évaluées par l'entremise d'une tâche de copie de phrases de près. Résultats : Les élèves utilisent différentes prises du crayon. Aucune relation significative n'a été identifiée entre ces prises et la vitesse et la lisibilité de l'écriture manuelle. La prise quadripode dynamique est la plus utilisée par les élèves de 2e année et de 4e année du primaire. Conclusion : La prise tripode dynamique n'est pas la seule prise fonctionnelle adoptée par les élèves. Les prises quadripode dynamique, tripode latérale et quadripode latérale sont tout autant fonctionnelles. Lors de l'enseignement de l'écriture, cette diversité quant à la prise du crayon devrait être prise en compte.

Key words | mots clés : *Clinical reasoning, Evidence-based practice*

Wednesday 10:35-11:00
Paper presentation: Child | Health and well-being
The impact of social inclusion in recreation: A qualitative study
Brydne Edwards VHA Home Healthcare, Debra Cameron, Gillian King, Amy C. McPherson

Introduction: Inclusive recreation programs can have individual and community impacts for children with and without disabilities. However, studies that explore the impact of such programs on children's attitudes are mixed. Objective: This study intended to explore the perspectives of children with and without disabilities on the individual impact of an inclusive recreation program. Method: This study adopted a generic qualitative methodology. Interviews were conducted with participants between the ages of eight and 18 enrolled in the same program and each participant was interviewed twice. Inductive thematic analysis was used to analyze results. Results: 17 participants were recruited for this study, which included nine children without disabilities (CWODs) and eight children with disabilities (CWDs). This study revealed five themes: a) CWODs have limited exposure to people with disabilities; b) CWODs and CWDs' hopes of change; c) CWODs learned how to interact with people with disabilities; d) CWODs reported greater perceived similarity in functional ability and hobbies/interests between themselves and CWDs, and; e) CWODs become more comfortable being around people with disabilities. Conclusions: This study helps broaden understandings of how inclusive experiences in recreation settings impact children with and without disability.

Key words | mots clés : *Community development, Occupational justice*

Wednesday 10:35-11:00
Poster defense: Not applicable | Occupational therapy education
The Canadian Model of Client-Centred Enablement for Indigenous contexts
Carly Hunter Dalhousie University, Tara White Dalhousie University

Introduction. The Truth and Reconciliation Commission outlines the need for health care professionals to create more welcoming spaces for Indigenous peoples who are accessing care. The scope of occupational therapy is continually expanding – yet the profession itself is grounded in and derived from a dominant Eurocentric worldview, and practice is designed to serve a homogenous Western populace. There is a need to critically examine the practice models and assessments utilized by the profession to

better serve Indigenous clients, communities and organizations. Objectives. To critically examine the Canadian Model of Client-Centred Enablement (CMCE) for its value within Indigenous contexts, providing suggestions to improve the model. Approach. Thorough examination of this practice model, using Two-Eyed Seeing (Bartlett et al., 2012) and a decolonizing strengths-based framework, assessed the core values embedded in the model and implications of using it in Indigenous contexts. Implications. The CMCE is positioned as a client-centered model within occupational therapy – however there is a clear hierarchical client-professional relationship threaded throughout. Concepts such as enablement, advocacy, educate, coach and coordinate demonstrate paternalistic authority, lacking reciprocity, knowledge-sharing and power-sharing. Grounding practice within Indigenous frameworks such as Ethical Space (Greenwood et al., 2017) might disrupt reliance on professional expertise that perpetuates dependence. Conclusion. Reimagining healthcare relationships as entrenched in social interconnectedness, demands critical reflection and action. A model of practice that endorses social change and actively addresses colonial power inequities must root its epistemological foundations in postcolonial views of healthcare as a social relationship between people rather than a client-professional service.

Key words | mots clés : *Models, Theory*

Wednesday 10:35-11:00
Poster defense: Adult | General/Professional issues/Practice
Interdisciplinary approach to reducing self-harm risks from hospital beds
Richard Kellowan Kingston Health Sciences Centre - Queen's University, Morgan Ticehurst Queen's University, Maryl Cook, Kimberley Smith, Emma Chester, Janet Obre, Sarah DaCosta, Melanie Darling, Kimberley Miller, Lucas Mott

Introduction: Adult hospital beds pose inherent risks for client self-harm and suicide. A critical incident on an acute mental health unit led to an interdisciplinary working group examining these risk factors and developing innovative safety tools. An occupational therapist assumed a leadership role utilizing the Person – Environment – Occupation – Process Model (PEOP) as a guiding framework. Objectives: Identify environmental risk factors for self-harm and suicide in mental health settings. Specify risks related to hospital bed use. Introduce safety tools. Highlight role of theory (PEOP) with tool development and implementation. Suggest next steps for research and education. Approach: Literature review identified environmental risk factors. Environmental scans, two vendors consults, and correspondence with four peer facilities and Health Canada explored risks specific to hospital beds. Twenty-seven staff from thirteen professional groups participated in biweekly meetings across a thirty-six week period to develop five safety tools: 1) environmental risk scans of thirty general unit and ten psychiatric intensive observation rooms; 2) safety scans of existing hospital beds for self-harm and suicide risk factors; 3) hospital bed inspection checklist, 4) decision tool for assigning hospital bed or weighted platform bed to clients; 5) "Block – Lock – Talk" tool for daily monitoring of hospital beds. Working group reviewed three behavioural health beds considering person, environment, and occupation factors. Practice Implications: Safety tools emerged for interdisciplinary use; clinical utility was demonstrated during admission surges from the pandemic. Policy development and procurement decisions reflected theory and practice. Conclusion: Interdisciplinary approach enabled innovative and responsive measures to ensure client safety.

Key words | mots clés : *Acute care, Mental health*

Wednesday 10:35-11:00
Poster defense: Older Adult | Health and well-being
Portrait des milieux d'action intergénérationnelle au Québec : une étude exploratoire
Mélissa St-Pierre Bolduc Centre de recherche de l'Institut universitaire de gériatrie de Montréal,
Carolann Shea Centre de recherche de l'Institut universitaire de gériatrie de Montréal, Marie-Ève
Lamontagne Centre interdisciplinaire de recherche en réadaptation et intégration sociale, Samuel
Turcotte Centre de recherche de l'Institut universitaire de gériatrie de Montréal, Fatima Ladjadj
Intergénérations Québec, Johanne Filiatrault Centre de recherche de l'Institut universitaire de gériatrie
de Montréal

Introduction : Un nombre croissant d'études attestent des bienfaits des activités intergénérationnelles
pour la santé des aînés. En outre, les aînés rapportent que ces activités leur procurent beaucoup de
plaisir et un sentiment d'accomplissement [1]. Au Québec, plusieurs organismes communautaires
incluent des activités intergénérationnelles dans leur offre de services. Un portrait de ces organismes a
été réalisé dans le cadre d'un projet de recherche-action visant la création d'une trousse d'outils pour
mieux soutenir l'action intergénérationnelle. Objectif : Cette étude exploratoire est la première phase
d'un scan environnemental exhaustif visant à dresser le portrait des milieux d'action
intergénérationnelle québécois. Méthodes : Les recherches quant aux milieux d'action
intergénérationnelle ont été effectuées sur internet (plateforme spécialisée, Facebook, sites internet,
...). Les données ont été compilées dans une grille comprenant des items de la liste TIDieR [2], puis
soumises à une analyse descriptive. Résultats : Au total, 67 organismes ont été répertoriés. La plupart
(n=22) étaient situés dans le Grand Montréal. La majorité (n=55) d'entre eux étaient des organismes
sans but lucratif, offrant des services principalement aux aînés. Les activités intergénérationnelles
répertoriées étaient variées (ex. : artisanat, mentorat) et plus souvent entreprises par des aînés dans le
but d'aider des jeunes. Conclusion : Les prochaines étapes du scan environnemental impliqueront une
collecte de données directement auprès des milieux d'action. Elles permettront de dresser un portrait
plus complet des milieux et de mieux refléter la diversité des pratiques intergénérationnelles. Les
ergothérapeutes œuvrant auprès des aînés vivant à domicile pourraient tirer profit d'une meilleure
connaissance de ces milieux et de leurs services.

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

Wednesday 10:35-11:00
Paper presentation: Child | Advocacy /Change agent
Problematizing the taken-for-granted in rehabilitation services offered to Inuit children
Janna MacLachlan University of Toronto, Andrea Andersen Government of Nunavut, Anita Benoit
University of Toronto, Earl Nowgesic University of Toronto, Stephanie Nixon University of Toronto

Introduction: There is increasing awareness of the Western underpinnings of rehabilitation professions,
including occupational therapy, which may not be relevant to all populations. Rehabilitation
professionals are encouraged to provide culturally safe services for Indigenous clients, but with a rarity

of critiques available representing Indigenous perspectives, practitioners may not recognize when taken-for-granted assumptions are problematic. Without appreciating how rehabilitation is envisioned and experienced differently from different perspectives and standpoints, harm may be done. Objectives: To compare and contrast requirements to support the rehabilitation interests of Inuit children with current mainstream rehabilitation service norms. Methods: This qualitative inquiry was designed following the Piliriqatigiinniq Model for Community Health Research (Healey & Tagak, 2014) and a decolonizing praxis approach. Data from 20 storytelling sessions with 25 participants were reviewed for areas of ontological and epistemological congruence and incongruence between Inuit and Western perspectives on supporting child development. Results: Tensions between Western and Inuit worldview perspectives were identified that could lead Western-trained therapists to cause harm in services for Inuit children. Participants expressed greater concern with tensions in approaches to service provision than with the tools and knowledge employed. An understanding of power dynamics between worldviews shows how defaulting to Western perspectives can reproduce meritocracy, coloniality and a suppression of Inuit rights. Conclusions: Through recognition of how worldview perspectives can differ and the concrete impacts this can have on families and services, occupational therapists are better supported to engage in critical reflexivity and provide culturally safe services. Relationship-based care and Inuit involvement in service provision are recommended.

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

Wednesday 11:30-12:30
Sponsored session: |
The Sequel to Enabling Occupation
Gayle Restall, Mary Egan, Josée Seguin

In November 2018 the Canadian Association of Occupational Therapists initiated the development of a next version of their flagship Enabling Occupation book series. Since September 2019 co-editors Gayle Restall and Mary Egan have engaged an Advisory Panel and chapter authors to produce this work. As with previous versions, this book will include the next evolution of a Canadian framework for contemporary and aspirational thinking about occupation therapy. Participants in this session will: 1) learn about the process of developing the textbook; 2) get a sneak preview of two new practice models/frameworks; and 3) have the opportunity to dialogue with the co-editors. The sequel is anticipated to be launched in May 2022.

Key words | mots clés :

Wednesday 11:30-11:55
Paper presentation: Not applicable | Advocacy /Change agent
Oppression literacy: Embracing a social vocabulary that supports transformation
Elizabeth Pooley Recent graduate of Dalhousie University

Introduction: As Debbie Laliberté Rudman shared in her 2020 Muriel Driver lecture, there is "growing awareness of the links between systems of oppression and everyday life and doing" (Farias & Simaan, 2020, p. 457). When considering possibilities for social transformation, a social vocabulary and/or

oppression literacy can support both discernment and response to social constraints on occupation. Objectives: 1) To review terms related to oppression including microaggressions, intersectionality, invisibility, hypervisibility, internalization, consciousness, and resistance. 2) To consider one's practice and research spaces and potential benefits that may result from the increased use of these terms. Approach: Terms and examples identified during a critical interpretive synthesis of occupational therapy and occupational science literature will be shared. In addition, a brief discussion will support critical reflection about these terms and practice environments. Practice implications: With a greater understanding and fluidity of terms related to oppression, we are more likely to identify problematic situations as they occur and recognize opportunities to advance justice. In addition, shared vocabulary facilitates growth of collective knowledge and priorities. Conclusions: Heightened familiarity with oppression-related terms may widen their use within occupational therapy. Oppression literacy is a much-needed move toward addressing social injustices within and beyond the profession.

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

Wednesday 11:30-12:30
Extended discussion: Not applicable | General/Professional issues/Practice
Beyond diversity: The need for an Indigenous occupational therapy community
Tara White Dalhousie University, Katelyn Favel, Angie Phenix, Holly Smith, Deanna Starr, Kaarina Valavaara

Introduction: Despite positive movement from national, provincial and local occupational therapy organizations to advance the Truth and Reconciliation Calls for Action and address systemic racism within the profession, occupational therapy remains a profession that operates strictly from a Western paradigm. This leads to a profession that privileges settler occupations while oppressing occupations that support Indigenous rights as occupational rights. This creates disparities of which occupations are recognized, valued and respected; thus limiting Indigenous occupational therapists ability to practice in a meaningful and respectful way. Indigenous occupational therapists have identified a need for a dedicated community of practice (CoP). Objectives: To share the initial journey and next steps in developing a self-directed group of Indigenous occupational therapists to create a self-governing, autonomous CoP. Session description: Panel presentations from Indigenous occupational therapists will share lived experiences of how occupational therapy clinical practice, research and education contributes to the ongoing cultural genocide of Indigenous rights, knowledges and sovereignty. Solutions to supporting Indigenous occupational therapists to reclaim and develop space within occupational therapy will be provided by panel members through an environmental scan of Indigenous healthcare organizations both nationally and internationally. The panel will present on the development of the CoP to date and share next steps to create a sustainable, funded CoP. The session will conclude with facilitated breakout groups where participants will be invited to contribute solutions and action plans for how settler occupational therapists can support Indigenous led occupational therapy initiatives within occupational therapy education, research and practice in Canada. Practice Implications: Indigenous occupational therapy students and therapists will have a dedicated space to explore how to align Indigenous ways of knowing and lived experiences within occupational therapy, provide and receive mentorship, and raise the profile of occupational therapy within Indigenous communities. This CoP will also be able to provide consultation, advocacy and education to settler occupational therapists

from a place of collective strength and wisdom. Conclusions: Through providing a dedicated space for mentorship, support and advocacy, this CoP will support occupational therapy to effectively deliver on the Truth and Reconciliation Calls of Action to increase and retain the number of Indigenous health care providers.

Key words | mots clés : *Occupational justice, Teaching/education*

Wednesday 11:30-11:55
Poster defense: Community/Population | General/Professional issues/Practice
The role of occupational therapy in emergency departments: Scoping review
Ali Zwicker UBC, Noelle Dalin UBC, Skye Barbic UBC

Introduction: Globally, there is a lack of consensus on the role and effectiveness of occupational therapy in emergency departments (EDs). A scoping review of the literature will inform this debate by providing evidence to support or refute the benefits of occupational therapists working in EDs. Objectives: To describe the role of occupational therapy in the ED and document the effectiveness, feasibility, acceptability, and economic benefit of including occupational therapy services in EDs. Methods: Using scoping review methodology, we conducted a thorough search of CINAHL, MEDLINE, and EMBASE databases for articles that met our inclusion criteria: (1) written in English or French; (2) any study design; (3) any country; and (4) emerging or published research. Two independent reviewers screened titles, abstracts, and full-text articles for inclusion; any conflicts were resolved by a third reviewer. Grey literature search is underway. Results: After removing duplicates, we screened 691 articles, of which 128 articles advanced to full-text review. Twenty-one published articles met inclusion criteria. Results provide evidence of: (1) occupational therapy on teams; (2) therapists' experience of working in the ED; (3) assessments used, and (4) interventions provided. Evidence suggests that occupational therapists in the ED primarily worked with older clients who had a fall, upper extremity injury, stroke, mobility issues, or chronic medical concerns. Conclusions: This scoping review provides evidence to inform national and international policy-makers of the role occupational therapy in EDs and how integrating occupational therapy services in EDs may impact client care, facilitate discharge planning, and prevent hospital admissions.

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

Wednesday 11:30-12:30
Extended discussion: Adult | Acute conditions
Clinical utility of the Occupational Therapy Return to Driving Screen
April Vander Veen Grand River Hospital, Sarah Renner Grand River Hospital, Michael Cammarata D''Youville College, Department of Occupational Therapy

Introduction: In 2018, Occupational Therapists (OTs) in Ontario were granted authority to report potentially unsafe drivers to the Ministry of Transportation. In anticipation of this expanded role, the researchers developed the Occupational Therapy Return to Driving Screen (OT-RTDS). The OT-RTDS is a toolkit to screen functional fitness to drive (FTD) for patients with transient ischemic attack (TIA) and mild stroke in acute care. The toolkit includes administration and interpretation guidelines, stakeholder

communication strategies, and community mobility planning resources. Objectives: The goal of this pilot study was to examine the usefulness and usability of the toolkit for addressing return to driving. Methods: In phase one, patients diagnosed with TIA/mild stroke, OTs, and physicians were surveyed regarding their experience trialling the OT-RTDS on an acute stroke unit. In the second phase, patient participants were contacted within one year for a follow-up telephone debrief questionnaire. Results: In phase one, 100% of OTs (n=9/9) and physicians (n=9/9) surveyed reported use of the toolkit had increased their confidence in making decisions regarding FTD. Moreover, all OTs (n=9/9) and 78% of physicians (n=7/7) described the OT-RTDS screening process as clear and understandable. All patient respondents (n=29/29; 100%) agreed participation in the OT-RTDS increased their confidence in making decisions about driving. As well, the majority of patient respondents (n=26/29; 90%) reported they understood their return to driving recommendations made to them in acute care. In phase two, 90% (n=18/20) of patient respondents recalled their recommendations from acute care. Of patients who were advised to abstain from driving for 30 days, 71% (n=10/14) reported they followed the recommendations of their health care team. Conclusions: This pilot study provides preliminary support for the clinical utility of the OT-RTDS among patients, OTs, and physicians. Further research is underway to continue to evaluate the enhance the OT-RTDS. This research is the first step in the development of a formalized, patient-centered, evidence-informed process for addressing driving after stroke in an acute care setting.

Key words | mots clés : *Older drivers, Stroke*

Wednesday 11:30-11:55
Paper presentation: Child | Early childhood
Parent-child playful co-occupations: is it playtime yet?
Emilie St-Arnaud-Trempe Université Laval, Catherine Vallée Université Laval, Paulette Guitard Université d'Ottawa

Introduction: Children living a motor impairment tend to have fewer opportunities to play. Thus, parents have a pivotal role in the exploration and facilitation of playfulness for these children. Playfulness can occur in various occupations, not just in traditional play or game. Playfulness can render any occupation 'play'. Hence, there is a need to describe how parents and their children living with a motor impairment, experience playful co-occupations. Objectives: This exploratory study aims to describe playful co-occupations, as experienced by parents of preschoolers living with a motor impairment, and situating how these co-occupations occur. Methods: Through a hermeneutical phenomenological design, six parents of children living with a motor impairment shared the meaning and their experiences of playful co-occupations. Data collection consisted of two semi-structured interviews and participative observations of the parent-child interactions in the participants' home environment. Analysis consisted of an interpretative analysis of interviews' and observations' data. Analysis was done through open coding, elaboration of successive syntheses and the use of hermeneutic circle principle to capture the essence of the experiences. Results: Playful co-occupations are co-constructed by parent-child transaction. Through a free and natural co-creation, these co-occupations transform participants' daily lives into precious moments. These co-occupations allow the dyad to experience moments of normalcy. Results suggest that recommended exercises presented as 'playful' activities and integrated into the

daily life, jeopardize playful co-occupations. Conclusion: The results of the study invite occupational therapists to recognize playful co-occupations' value by seeking to preserve and facilitate them.

Key words | mots clés : *Community development, Occupational science*

Wednesday 11:30-11:55
CSOS paper: Not applicable | General/Professional issues/Practice
Equity and inclusion among occupational therapists: The toll of marginalization
Brenda Beagan Dalhousie University, Stephanie Bizzeth Dartmouth General Hospital, Kaitlin Sibbald Dalhousie University, Tara White Dalhousie University

Rationale: Individuals from groups that experience social marginalization may continue to experience marginality working in the health professions, including in occupational therapy, despite professed commitments to equity and justice. Professional status alone does not transform social exclusion. Attending to experiences of marginalization and injustice among therapists within the profession may illuminate opportunities and barriers for inclusion of occupational therapists from marginalized groups. Objectives: This paper presents preliminary results from a study with 20 occupational therapists, exploring professional and workplace inclusion and exclusion as experienced by therapists, both overtly and through subtle micro-level interactions. Methods: From across Canada, therapists were recruited who self-identify as racialized, disabled, ethnic minority, minority sexual/gender identity, or from working-class backgrounds. Semi-structured interviews, grounded in critical qualitative approaches, explored experiences of belonging and not-belonging in the profession. Results: Across categories of 'difference', participants described a profession haunted by the spectre of a 'normative' occupational therapist, one who is white, Euro-Canadian, middle-class, non-disabled, heterosexual and cis-gender. Everyday assumptions and interactions, dominant theories and models, and perceptions of appropriate 'professionalism' convey (intended and unintended) exclusion. Messages of not-belonging are typically subtle, and are especially challenging at systems and institutional levels. Conclusions: Therapists from marginalized groups continue to work twice as hard to be considered equally good, continue to face undermining of their professionalism and authority, and face ongoing tensions between enabling justice for clients, and experiencing injustices themselves.

Key words | mots clés : *Occupational justice, Theory*

Wednesday 12:05-12:30
Poster defense: Adult | Chronic conditions
MyGuide: Evaluation of an Online Self-Management Tool for Concussion Rehabilitation
Christopher Yao University of British Columbia, Colleen O'Melinn University of British Columbia, Patricia Mahoney Vancouver Coastal Health Authority, Sue Barlow Vancouver Coastal Health Authority, Julia Schmidt University of British Columbia & Rehabilitation Research Program

Introduction: There is growing evidence supporting digital concussion self-management programs (e.g., mobile applications and websites) providing far-reaching and accessible support for symptom management, behaviour change, and occupational re-integration. However, much of this evidence is focused on adolescent populations; there are limited studies examining the use of these self-

management programs in adult concussion populations. Objectives: This study explores the user experience of an online concussion self-management tool, including potential impact on self-management as well as recovery, clinical utility, and implementation barriers. Methods: Using a triangulation mixed-methods design, the Design and Evaluation of Digital Health Interventions framework will be used to guide the evaluation of the MyGuide Concussion website and development towards large-scale implementation. Evaluation criteria for this initial phase includes ease of use, adherence, personalization, and implementation barriers. We will recruit adults with persistent concussion symptoms who have accessed the website and clinicians working in concussion rehabilitation. Participants with concussion will complete a user experience survey (Health Information Technology Usability Evaluation Scale, System Usability Scale) (n=20) and a semi-structured interview (n=10). Clinicians will undertake a semi-structured interview (n=5). Quantitative data will be analyzed using descriptive statistics and qualitative data will be analyzed using a deductive content analysis. Practice implications: These findings will guide the broad implementation of online concussion tools in clinical care to optimize and support recovery. Conclusions: Findings will provide insight into the acceptability, feasibility, and potential benefit of online self-management tools in concussion rehabilitation and may provide important design considerations in this population.

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

Wednesday 12:05-12:30
Poster defense: Community/Population | General/Professional issues/Practice
Global community-based practice: From Botswana to New York
Sean Getty Stony Brook University, Gerald Oler

Introduction: Occupational therapists play a prominent role in both community-based treatment and community development (Leclair et al., 2016). While occupational therapy practice might vary based upon geographical location or culture, there are common variables that seem consistent, such as the use of occupation and clinical reasoning skills (Marquez-Alvarez et al., 2019). Objectives: The goal of the presentation is for practitioners to gain an understanding of developing community-based and community development programs. Participants will also gain an understanding of how culture and geographic location play a role in occupational therapy treatment. Approach: This poster session will present the work of two occupational therapists that have developed community-based programs in two divergent parts of the world. One presenter has developed several programs in rural Africa, addressing mental health and educational needs. The other presenter has worked to develop a community coalition that implements occupation-based programs to prevent opioid addiction, assist youth at risk for mental health issues, and improve community wellness in the United States. Practice implications: Participants will be able to use the knowledge gained from this presentation in order to develop programs in their communities to address local problems. The future of occupational therapy is in developing programs to improve health and well-being (Pizzi & Richards, 2017). Attendance at this session will assist participants with the skills and confidence to develop these programs. Conclusions: There is a need for practitioners to develop an understanding of how to implement community-based programs and this session will assist them in gaining that knowledge.

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

Wednesday 12:05-12:30
Poster defense: Child | Chronic conditions
Trouble développemental de coordination, sentiment de compétence, motivation et MOTIFORM.
Marie-Ève Laflèche University of Montreal, Anaïs Paradis University of Montreal, Mariève Blanchet University of UQAM, Marie-Noëlle Simard University of Montreal, Sabrina Cavallo University of Montreal

Introduction: Les enfants ayant un trouble développemental de la coordination (TDC) présentent des atteintes au niveau des habiletés motrices. Par conséquent, ils ont tendance à avoir un sentiment de compétence (SC) plus bas et à être moins motivés à s'engager dans les activités physiques. MOTIFORM, un programme d'activités physiques de groupe, a donc été créé. Objectif: Identifier l'effet de MOTIFORM sur le SC (physique, cognitif, social) et la motivation dans les activités physiques d'enfants de 5-11ans atteints d'un TDC. Méthodes: Vingt-trois enfants de 5-11 ans atteints d'un TDC ont participé à cette étude pré-post. Ceux-ci étaient divisés en un groupe intervention (MOTIFORM) et un groupe contrôle (liste d'attente). Le programme de 12 semaines consistait en des séances hebdomadaires de 90minutes. Le SC a été mesuré avec le Self-Perception Profile for Children (version picturale utilisée pour les enfants de 5-7ans). Le niveau de motivation dans l'activité physique a été mesuré avec l'Échelle de satisfaction des besoins fondamentaux. Résultats: Au T2, une différence qui tend vers la significativité a été démontrée entre les deux groupes pour le SC physique (h=0, 16; p=0, 08). Le niveau d'amotivation pour le groupe intervention a diminué de T1 à T2 (p=0, 08). La motivation extrinsèque auto-déterminée et le SC cognitif sont en faible corrélation (r=0, 38 p=0, 07), tout comme la motivation intrinsèque et le SC physique (r=0, 39 p=0, 06). Conclusion: La participation à un programme comme MOTIFORM pourrait améliorer le SC et la motivation dans l'activité physique chez les enfants atteints d'un TDC, mais de plus amples recherches sont requises.

Key words | mots clés : *Developmental coordination disorder, Evidence-based practice*

Wednesday 12:05-12:30
CSOS paper: Child | Primary care/Primary healthcare/Population health
Becoming culturally safer: Stories of paediatric practitioners with/in Indigenous communities
Hiba Zafran McGill University, Hilary Byrne McGill University, Alexa Cirillo McGill University, Daisy Petrucci McGill University, William Murphy-Gelderman McGill University, Naomie Gamondele McGill University

Introduction: Indigenous peoples receive lower quality healthcare services in a demonstrated context of systemic racism. This is compounded in paediatric services with the colonial imperative to assimilate and remove Indigenous children from their communities. There is a lack of rehabilitation research about the realities of practicing cultural safety within Indigenous communities. The aim of this project was developed in partnership with an Indigenous-led paediatric service. Objectives: Explore culturally safe rehabilitation practices around neurodevelopmental diagnoses in children and their families, within rural or remote Indigenous communities. Methods: An anti-colonial research framework was applied to examine the core elements of cultural safety in theory, in practice, and as a lived experience. Eighteen definitions of cultural safety were extracted from the literature and thematically analyzed. Narrative interviews (N=17) were conducted with practitioners, administrators, and Elders working in and around

rehabilitation in isolated Indigenous communities. Their stories were narratively interpreted in order to understand the particularities and stakes in becoming culturally safer. Results: While overlapping with definitions of cultural safety, practitioners made explicit trauma-informed approaches and the complexity of relationship building. Practitioners experience cultural safety as an on-going, complex, fraught, and deeply personal journey to becoming a part of the communities they work with/in. They provide ethical-reflexive guideposts and strategies for the journey. Conclusion: The experiences of primarily settler rehabilitation professionals critically question and resist the use of standardized paediatric assessments within Indigenous communities, ideological assumptions of Eurocentric evidence-based practices, and Western notions of 'professionalism'.

Key words | mots clés : *Clinical reasoning, Theory*

Wednesday 1:30-2:30
Sponsored session: |
CAOT's Truth and Reconciliation Taskforce: Leading a path toward reconciliation
TRC Taskforce

Rationale: Indigenous Peoples in Canada experience inequitable access to health care and poorer health outcomes than non-Indigenous Canadians. Reports such as the Truth and Reconciliation Commission Final Report (TRC; 2015) and the Final Report of the Inquiry into Missing and Murdered Indigenous Women and Girls (MMIWG; 2019) outline recommendations for systemic change within various sectors, including health, social services, education and justice. In June 2019, the Canadian Association of Occupational Therapists (CAOT) Board of Directors voted unanimously to convene the CAOT TRC Taskforce. The mandate of the taskforce is to take a leadership role in facilitating actions to create sustainable occupational therapy research, clinical practice, and education that fosters reconciliation and decolonization within the profession. Objectives: The objectives of this knowledge exchange extended session are to: 1. Share updates of the taskforce's activities and plans. 2. Provide an opportunity for participants from across the country to share stories of successes, barriers, resources and needs that can inform the work of the taskforce. Session description: The session will open with a 20-minute overview of the taskforce's work completed to date and the three-year action plan. Following this, participants will go into break-out groups for twenty minutes to share interests, stories and needs from their experiences in clinical practice, research and education. Feedback will be sought on the action plan in terms of resonance to current practice, opportunities for contribution and outstanding issues. Facilitators will lead a structured discussion and record notes in each group. The last 15 minutes will provide time for reviewing main themes from the breakout groups and answering questions. Practice implications: This session will be beneficial to both participants and presenters. Participants will have an opportunity to learn about and contribute to their national association's responses to recommendations from the TRC and MMIWG reports. They will have opportunities to address learning goals, supporting them in advancing occupational therapy practice with Indigenous Peoples. Presenters will gather input from participants, informing their actions and priorities moving forward to best represent and address needs across the country. Conclusions: Progress toward reconciliation and decolonization in occupational therapy is facilitated by ongoing and open dialogue, collaboration, community and friendship.

Key words | mots clés :

Wednesday 1:30-1:55
Poster defense: Child | Advocacy /Change agent
An interagency program building capacity and agency in transition-aged youth
Laura Hartman Holland Bloorview Kids Rehabilitation Hospital, Laura Thompson Holland Bloorview Kids Rehabilitation Hospital, Sara Francavilla Yorktown Family Services, C.J. Curran Holland Bloorview Kids Rehabilitation Hospital, Anna Oh Holland Bloorview Kids Rehabilitation Hospital, Gillian King Holland Bloorview Kids Rehabilitation Hospital, Neeli Grewal Yorktown Family Services

Introduction: Transition to the adult healthcare system has historically been a challenge for transition-aged youth with disabilities (TAYD). Increased demands for coordination, navigation, and decision-making, with less support than is available in the pediatric system, contribute to transitions that are confusing and unfamiliar. Existing interventions focus on the healthcare system's agenda for TAYD's movement to adult healthcare, rather than on the essential capacities required to navigate adult systems. Objectives: To describe how our team developed an interagency program to build TADY's capacity to manage appointments and agendas during their transition to adult healthcare services. The program involves a pediatric rehabilitation hospital and mental health service who deliver client-driven programming to build skills in participants' own contexts. The program is based on solution-focused and resiliency perspectives and harnesses best transition practices of interagency collaboration and personalized approaches to care. Methods: 5-10 participants will participate in the program. Data will include pre-post Canadian Occupational Performance Measures and Goal Attainment Scaling, post-intervention administration of the Client Satisfaction Questionnaire-8, Partners in Health Scale, and qualitative focus groups for staff and clients. Results: Pilot results indicate that TAYD benefitted from practical opportunities to work towards their own goals, and staff appreciated joint capacity building across sectors through shared planning and facilitation. Full results are forthcoming winter 2020. Conclusions: Direct collaboration with adult sector institutions may contribute to early exposure and contextually-relevant capacity building for TAYD. A dedicated space in which to practice essential skills and receive constructive feedback can help TAYD become effective self-advocates and self-managers.

Key words | mots clés : *Advocacy, Models*

Wednesday 1:30-1:55
Paper presentation: Non-specific | General/Professional issues/Practice
Inclusion of sustainability in Canadian national occupational therapy documents
Janet Craik

Introduction: Human activities, including healthcare practices are contributing to an unsustainable global environment and have a negative impact on the health, well being and justice of all populations. Healthcare practitioners, including occupational therapists need to consider how can we can deliver sustainable healthcare practices that promote population health and protect the natural and social environments on which human health and well-being depends. In a study by Chan, Lee, & Davis (2020), Canadian occupational therapists expressed a lack of sustainable actions in their professional activities, despite engaging in sustainable actions on a personal level. The participants perceived a lack of guidance

documents for addressing sustainability. Objectives: To describe the inclusion of sustainable healthcare principles in guiding documents for Canadian occupational therapy practice. Methods: Current national occupational therapy guidance documents were examined and mapped to key themes of sustainable healthcare practice. Results: Key Canadian occupational therapy documents reviewed mentioned elements of sustainable practices; however, no document explicitly gave reference to sustainable healthcare practice. Most elements cited were related to social inclusion. Some elements of economic inclusion can be inferred and there was no direct reference to elements relating to ecological integrity. Conclusions: It is crucial to acknowledge the current lack of guidance for sustainable healthcare in key guidance documents for occupational therapy practice in Canada and to engage in discussions to rectify this. If occupational therapists want to provide health and high-quality care for all, now and for future generations, we need to embed sustainability into everything we do now and in the future.

Key words | mots clés : *Models, Theory*

Wednesday 1:30-1:55
Poster defense: Adult | Primary care/Primary healthcare/Population health
Client-centered generalists: primary care occupational therapists delivering mental health services
Pamela Wener University of Manitoba, Ursula Koslowsky Wiebe University of Manitoba

Introduction: Primary care is being called upon to bridge the gap between mental health/psycho-social care needs and the lack of available services. Occupational therapists working in primary care are well positioned to make a contribution to bridging this service delivery gap. To date, occupational therapists' contributions to mental health/psycho-social service delivery in primary care have not been explored. Objectives: To explore the contribution and experiences of primary care occupational therapists delivering mental health and psycho-social services. Methods: A qualitative case study design was used to explore occupational therapists' experiences delivering mental health/psycho-social services in primary care settings in an urban centre in Canada. Data collected via individual and group semi-structured interviews were analyzed inductively, guided by Braun and Clarke's (2006) six-step approach: 1) data familiarization 2) generate initial codes 3) develop themes 4) review themes 5) define and name themes 6) report. Results: Occupational therapists are holistic practitioners who as client-centered generalists, deliver mental health/ psycho-social services in primary care. Environmental influences at the micro, meso and macro levels, create gaps in service. Primary care occupational therapists use their client-centered generalist lens to identify the environmental barriers and facilitators; then mitigate the barriers and use the facilitators to provide mental health/psycho-social services. Conclusions: As client-centered generalists, occupational therapists are bridging the service delivery gap by providing access to needed mental health/psycho-social services to clients in primary care settings. Primary care occupational therapists are improving access to mental health/psycho-social services; thereby improving client care.

Key words | mots clés : *Interprofessional, Mental health*

Wednesday 1:30-1:55
Paper presentation: Adult | Health and well-being
Veteran-Friendly Campuses in Alberta: Supporting Veteran Military to Civilian Transition

Chelsea Jones Heroes in Mind Advocacy and Research Consortium (HiMARC), University of Alberta, Daniel Sheppard Department of Occupational Therapy, University of Alberta, Rachel Taylor Department of Occupational Therapy, University of Alberta, Lorraine Smith-MacDonald Heroes in Mind Advocacy and Research Consortium (HiMARC), University of Alberta, Suzette Breamult-Phillips Heroes in Mind Advocacy and Research Consortium (HiMARC), University of Alberta

Introduction: Veterans experience mental, physical, cultural, spiritual, and social barriers when transitioning from the military to civilian life which may impact their participation and success in post-secondary education. Amongst veterans, limited academic success rates may be attributed to a variety of personal, environmental, institutional/organizational, or cultural factors present during post-secondary engagement. A Veteran Friendly Campus (VFC) approach has been demonstrated to assist with the academic success of veterans; however, this approach is only beginning to emerge in the Canadian context. Objectives: To discuss the biopsychosocial-spiritual role that occupational therapists can play in an post-secondary environment to promote success in academia and life for veterans. Approach: A literature review was completed on veterans and post-secondary education. The Canadian Model of Occupational Performance and Engagement (CMOP-E) was compared to the Veteran Affairs Canada Wellbeing Constructs to develop a strategy that compliments VFC initiatives. Practice Implications: The support of an occupational therapist could benefit veterans, by promoting independence and wellbeing, facilitating navigation of the intersectionality of needs and barriers, recognizing strengths, and supporting the military-to-civilian transition. An occupational therapist might ensure veterans have access to holistic support which may include guidance in life skills, such as financial management, addressing mental and physical dysfunction, establishing community and peer connection, and providing educational resources for family, peers, faculty, and staff. Conclusions: Occupational therapists within a VFC could contribute to the academic, and overall, success of veterans by promoting well-being from a biopsychosocial-spiritual lens, that will carry over into all areas of their lives.

Key words | mots clés : *Advocacy, School health*

Wednesday 1:30-1:55
Poster defense: Child | Mental health
Testing a new occupational therapy measure of function for youth
Rosemary Cheung University of British Columbia, Candace Ho University of British Columbia, Skye Barbic University of British Columbia

Introduction: Canadian youth experiencing mental illness and problematic substance use encounter barriers in accessing services and face high levels of functional impairments (Hetrick et al., 2017). To serve this group better, understanding the scope of functional problems youth experience is of utmost importance. A patient-reported outcome measure developed from the perspective of young Canadians can best capture the continuum of function they experience (Coulter, 2017). To date, we are unaware of any existing measure of function for Canadian youth. Objectives: Based on previous research and item development (Barbic Under review), this study will test if the new measure of function is fit for purpose to measure function in a clinical and non-clinical sample of young Canadians. Methods: Canadians aged 16-24 will be invited to complete a survey containing the new function measure and other evidence-

based assessments. Working alongside youth-patient partners, we will use traditional and modern psychometrics to examine the measure for reliability, clinical meaning, and model-fit. Results: We will present the results of 250 youth completing the study and provide suggestions for how the new measure can be used in occupational therapy practice. Conclusions: By determining the fitness of purpose of this new measure, this study will provide preliminary evidence for a set of items that can be used in occupational therapy practice to guide further assessment and inform intervention effectiveness. The measure has the potential to make a significant contribution to the quality of services that youth with mental illness and substance use access across Canada.

Key words | mots clés : *Assessments, Mental health*

Wednesday 1:30-1:55
Poster defense: Adult | Chronic conditions
Exploring COVID-19 Related Experiences of Individuals with Spinal Cord Injury
Ethan Simpson University of British Columbia, William Miller University of British Columbia, Jaimie Borisoff BCIT, Julia Schmidt University of British Columbia, Ben Mortenson University of British Columbia

Background: Individuals who have sustained a spinal cord injury (SCI) have gone through a life changing experience from the injury itself. The current COVID-19 pandemic now introduces additional changes. Objectives: Our primary aim was to explore COVID-19 related lived-experiences of those with an SCI. Our secondary aim was to identify occupational and psychosocial changes experienced by individuals with an SCI over time during the COVID-19 pandemic. Methods: This ongoing study uses a convergent parallel mixed-methods longitudinal design (Schoonenboom & Johnson, 2017). Data are being collected at four time points. Semi-structured interviews are being used to explore participants' experiences. At each time point, participants are also completing standardized measures assessing mental health, resilience, boredom, social support, technology use, life space, and participation. Repeated measures ANOVAs will be used to identify longitudinal quantitative changes. Qualitative data will be analysed thematically (Braun & Clarke, 2006). Results: We have collected data at three time points from 22 participants thus far (Age: 53 ☐ 11, Female: n = 10). Data analysis is currently underway. Conclusions: The COVID-19 pandemic is impacting the lives of all and there is no clear end in sight. Individuals with SCI are potentially more exposed to the negative consequences of current measures, so it is essential to explore their experiences, coping, and identify any potentially unmet occupational needs they have.

Key words | mots clés : *Community care, Pandemic*

Wednesday 1:30-1:55
Poster defense: Community/Population | Occupational therapy education
Sentinel events during the transition from student to occupational therapist
Achini De Silva University of Toronto Mississauga, Eleanor Furtado University of Toronto Mississauga, Anne Hunt University of Toronto

Introduction: Research suggests that new occupational therapy (OT) graduates may face a challenging transition from MScOT graduate to OT practitioner as they encounter many positive and negative experiences during this process (Toal-Sullivan, 2006). An in-depth exploration of these experiences,

known as sentinel events within the life course paradigm (Nalder et al., 2012), is lacking; findings may inform how best to support the transition from student to OT practitioner. Objectives: To determine: 1) sentinel events that occur during the transition from student to OT practitioner and 2) their impact on the practice of new OT practitioners. Methods: Using a phenomenographic approach (Marton, 1986) to study design, we will employ purposive and snowball sampling to recruit recent graduates from Canadian OT programs. We will conduct semi-structured interviews to identify and explore the phenomenon of sentinel events during participants' transition from student to OT practitioner. Following interview transcription, we will use Marton's (1986) approach to phenomenographic data analysis to sort data into categories based on similarities and dissimilarities to derive core meanings from categories. To establish rigor of analysis, we will member check data to ensure findings are representative of the participants (Carlson, 2010). Implications: Study findings will inform our understanding of this important transition and may provide insight about how and when to tailor experiential opportunities within academic and work environments to promote a successful transition from student to OT practitioner. Conclusion: Information about sentinel events during the transition to OT practitioner may supplement existing literature and support graduates' transitions to practice.

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

Wednesday 2:05-4:00
Professional issue forum: |
Professional issue forum: Palliative and end-of-life care: Making space for uncomfortable conversations

A transition to palliative and end-of-life care is often accompanied by loss of occupation, feelings of grief, and bereavement for family and loved ones. There is an opportunity for OTs to hold space for suffering, questions about meaning and spirituality, and to care for clients' psychosocial needs.
This Professional Issues Forum (PIF) will build on the theoretical foundations of occupational therapy to equip OTs to confidently use a palliative approach to care continuum in all settings.
Specifically, this PIF aims to:
  Raise the awareness of palliative and end of life issues, including bereavement, and expand the possibilities for OTs in their own practice;
  Discuss how a palliative approach to care is both feasible and valuable;
  Explore how OTs can assist clients to find meaning through occupational engagement that can transform end-of-life experiences; and
  Explore further advocacy to establish occupational therapy within palliative care services across Canada.

Key words | mots clés :

Wednesday 2:05-2:30
Poster defense: Adult | Advocacy /Change agent
COVID-19 lived experience of people with intellectual and developmental disabilities

Megan Peterson University of Manitoba, Sarah Starodub University of Manitoba, Nikki Yaworski University of Manitoba

Introduction: During the COVID-19 pandemic adults with intellectual and/or developmental disabilities have been neglected during pandemic planning and have experienced occupational loss and deprivation due to the closures of day programs, support services, and other publicly funded sources. These services are required for individuals to participate in meaningful occupations related to self-care, productivity, and leisure. Objectives: The aim of this study is to explore the lived experiences of adults who identify as having an intellectual or developmental disability during the pandemic. The researchers aim to gather information on the barriers caused by COVID-19 restrictions and to advocate for change and additional support from community stakeholders. Methods: Individual virtual semi-structured interviews will be carried out with 8 participants. The discussions will be audio-recorded, transcribed, and analyzed qualitatively to identify common themes from the experiences of the participants. Follow-up interviews will be conducted as needed for member checking purposes. Data analysis will follow an inductive approach, by using the transcribed interviews and description of the researchers' field notes as the foundation for developing main themes and concepts. Results: The study is due to conclude in May of 2021, with results available in June of 2021. Conclusions: To be determined.

Key words | mots clés : *Advocacy, Pandemic*

Wednesday 2:05-2:30
CSOS paper: Adult | Environment
Understanding Belonging for Disabled Young Adults through Socio-Spatial Mapping
Rebecca Renwick University of Toronto, Maria Jennifer Estrella University of Toronto

Introduction: Recent research emphasizes belonging as an essential concept for studying/promoting community engagement for young adults (YA) with intellectual/ developmental disabilities (IDD). However, little research focuses directly on roles of occupation in finding a sense of belonging, and none incudes perspectives of YA with IDD. Since communication is an issue for some YA with IDD, arts-based methods could be fruitful for eliciting their perspectives. Having such research evidence could better illuminate relationships between occupation and belonging as well as inform research and program development. Objectives: Using an arts-based method, this qualitative study aimed to understand perspectives of YA with IDD about how they come to experience belonging (or not) in their communities, through engaging in occupations within associated environmental contexts. Methods: Nine YA with IDD (18- 35 years) each participated in two qualitative, video-recorded interviews. In the first, participants created socio-spatial maps, by drawing and using various art media, showing important ways (e.g., places/spaces, people/groups, occupations) for finding their sense of belonging. They also discussed the meaning of their maps. The second interview probed key information identified and relevant issues not addressed during the first session. Thematic analysis was conducted for content of participants' maps and 18 video-recorded interviews. Results: Several conceptual themes related to belonging, occupation, and occupational context will be presented supported by evidence from participants' verbatim quotes and visual images from participants' socio-spatial maps. Conclusions: Results: (a) illuminate occupation-belonging relationships; (b) highlight the value of socio-spatial

mapping; (c) help inform development/refinement of occupational therapy programs/services and research.

Key words | mots clés : *Advocacy, Occupational science*

Wednesday 2:05-2:30
Poster defense: Adult | Mental health
Developing a comprehensive occupational therapy documentation guide for inpatient groups.
Morgan Ticehurst Queen's University, Richard Kellowan Kingston Health Science Centre - Kingston General Hospital (KGH)

Introduction: Occupational therapy (OT) documentation for inpatient mental health groups should communicate client performance, demonstrate professional standards, and identify client care needs. A quality improvement initiative occurred to develop a documentation guide to address the above and highlight the role of OT. Objectives: 1) Introduce OT documentation guide; 2) Outline development and evaluation processes; and 3) Discuss practical applications and outcomes. Approach: The guide was developed using five resources: 1) literature review on group facilitation and mental status examinations; 2) College of Occupational Therapists of Ontario standards for consent, assessments, record keeping, student supervision and group documentation; 3) Four non-standardized OT assessments of group performance; 4) Existing facility documentation policy; and 5) "BESTPICK" Guidelines (RNAO, 2017). Seven revisions occurred over a six-month period. To evaluate clinical utility, three peer-reviewed, online, semi-structured questionnaires (10 items) were developed using qualitative principles by Depoy & Gitlin (2016) for: occupational therapists (7); physicians (10); and, nursing and allied health staff (75). Recruitment occurred through email list-servers. Practice Implications: Questionnaire response rate was low (n= 7). Detailed responses resulted in changes to the documentation guide allowing therapist to: clearly document group participation and client performance factors (physical, affective, cognitive, environmental); meet professional and employer standards; communicate with physician and nursing staff and identify client needs for group performance and individual OT assessment and intervention (i.e. self-care, cognition, discharge planning, etc.). Conclusion: The documentation guide enabled comprehensive and concise charting that identified client needs, met professional standards, and highlighted occupational performance needs.

Key words | mots clés : *Interprofessional, Mental health*

Wednesday 2:05-2:30
Paper presentation: Adult | Health and well-being
Retombées d'activités artistiques sur les personnes présentant une déficience intellectuelle
Camille Gauthier-Boudreault Université de Sherbrooke, Véronique Rochon, Sarah Rahimaly, Élodie Hérault, Élise Milot, Miranda D'Amico, Mélanie Couture

Introduction : Le quotidien des adultes présentant une déficience intellectuelle (DI) est souvent synonyme de sédentarité et de manque d'activités stimulantes dans un environnement isolé de la communauté. Les activités artistiques sont une avenue intéressante pour favoriser leur engagement occupationnel. Malgré le potentiel que présentent ces médiums artistiques, ils sont encore peu utilisés

auprès des personnes présentant une DI. Objectifs : La présente étude visait à documenter les retombées de la mise en place d'activités basées sur la musique, la danse et le théâtre sur les adultes présentant une DI fréquentant un organisme communautaire. Méthodes : Cette étude est de nature qualitative. Des entrevues individuelles ont été menées auprès de personnes présentant une DI, leurs parents et des responsables des activités. Un groupe de discussion a été réalisé avec les intervenants de l'organisme. Les notes de l'ergothérapeute concernant le déroulement des activités ont aussi été analysées. Résultats : La participation aux activités artistiques a eu des retombées positives sur la dimension physique, cognitive, affective et spirituelle des personnes présentant une DI. Elles ont favorisé le développement de leur estime de soi et du sentiment d'appartenance au groupe. Un concept ayant émergé des entrevues repose aussi sur le sentiment de fierté des parents et la prise de conscience concernant les capacités de leur enfant. Conclusion : Reconnaissant que le quotidien des adultes présentant une DI est souvent défini par un manque d'occupations signifiantes, l'offre d'activités artistiques représente une stratégie fort pertinente pour les engager à long terme dans un projet adapté à leurs capacités.

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

Wednesday 2:05-2:30
Paper presentation: Child | Advocacy /Change agent
The impact of developmental coordination disorder: Parent perspectives
Erin Klein, Melissa Licari University of Western Australia, Skye Barbic University of British Columbia, Jill Zwicker University of British Columbia

Introduction: Affecting one in 20 children, developmental coordination disorder (DCD) is a common neurodevelopmental disorder that impedes motor function and interferes with activities of daily living, school performance, and leisure pursuits. However, occupational therapy is not standard of care and few, if any, school supports are provided to children with DCD. For occupational therapists to advocate for change, it is necessary to understand parents' perspectives of the impact of DCD and the needs of their children. Objectives: To gather the perceptions of parents in British Columbia regarding diagnosis, access to therapy, and educational support, as well as the physical, mental, and financial impacts of DCD. Methods: The impACT for DCD on-line questionnaire was distributed across the province from October 2019 to April 2020 to parents of children with DCD through convenience, purposive, and snowball sampling. Descriptive data analysis was used for close-ended questions and content analysis for open-ended questions. Results: A total of 244 questionnaires were analyzed. Families reported waiting 1-4 years for a diagnosis. Access to school-based therapy was inconsistent, with 75% choosing to pay out-of-pocket for time-limited therapy. Limited teacher and counsellor knowledge of DCD and few classroom supports were reported. Parent-identified priorities include: (1) funded, coordinated, and timely diagnostic services; (2) publically-funded occupational therapy assessment and intervention; (3) mental health support from clinicians knowledgeable about DCD; and (4) education of teachers about DCD and classroom support for their children. Conclusions: Results of this study will support advocacy efforts to improve support and services for children with DCD.

Key words | mots clés : *Advocacy, Developmental coordination disorder*

Wednesday 2:05-2:30
Poster defense: Child | Health and well-being
Examining interprofessional interventions for treating pediatric concussions: A scoping review.
Alessia Roman University of Toronto, Danielle Hildebrand University of Toronto, Katherine Wilson Bloorview Research Institute, Kylie Mallory Bloorview Research Institute and University of Toronto, Nick Reed Bloorview Research Institute and University of Toronto

Introduction: Concussion symptoms can negatively impact youths' quality of life and interfere with their ability to engage in important occupations such as school, work and play. Many youths who have a concussion will experience persistent concussion symptoms for months or years. Interprofessional healthcare teams are beneficial for treating persistent concussion symptoms amongst youth; however, there are currently no reviews that highlight the various interventions used. Objective: To determine the interventions used by interprofessional healthcare teams when treating youth with persistent concussion symptoms. Methods: A scoping review following the methodological framework provided by Arksey and O'Malley will be completed. It will search MEDLINE, Embase and CINAHL databases, reference lists, and journals for relevant articles. Articles will be included if (1) participants are aged 4-18 years old; (2) experiencing concussion symptoms for more than four weeks; and, (3) the interventions involve an interprofessional healthcare team, which consists of two or more healthcare professionals working together to treat persistent concussion symptoms. Results: Upon completing the search, data will be extracted on types of interventions used, healthcare professionals on the interprofessional teams, and participant outcomes. Clinical implications of the reviewed articles will be presented and discussed in the broader context of rehabilitation and occupational therapy practice. Conclusions: This scoping review aims to inform concussion researchers and interprofessional healthcare teams on the interventions used to treat pediatric persistent concussion symptoms. The findings will also demonstrate the role of occupational therapists on interprofessional healthcare teams when managing concussion in youth.

Key words | mots clés : *Brain injury, Interprofessional*

Wednesday 3:00-4:00
Extended discussion: Community/Population | Environment
Shifting Landscapes – The Intersection Between Placemaking and Occupational Therapy
Susan Mulholland University of Alberta

Introduction: "Placemaking" is an urban design strategy gaining momentum globally and aligns well with occupational therapy given it promotes the intersection of physical "space" and occupation to create a meaningful "place". At its core, placemaking is a community driven multi-faceted approach leveraging local assets, inspiration, and potential to create quality public places for social life in areas previously underutilized or neglected. Examples include chalk drawings on sidewalks, planting flowers in empty greenspaces, building skateboard parks in abandoned parking lots. Intentionally cleaning and adding interest to public spaces creates a destination with opportunity for occupation and engagement. Ideally, placemaking endeavours to attract people of all ages, abilities, and backgrounds to linger and connect with others while, for example, enjoying art or nature, playing games, or learning something. Key benefits of placemaking are twofold; a) community connections are fostered through placemaking

design, development and maintenance processes and b) the new "place" ultimately contributes to individual and community health and wellbeing. Objectives: The purpose of this session is to introduce core concepts of placemaking, discuss synergies with occupational therapy, and apply learnings by generating plans for such projects. Session Description: Using a virtual platform, a brief oral presentation will outline core placemaking concepts including tactical and guerrilla urbanism, and Crime Prevention Through Environmental Design. Next, in small breakout groups participants will identify professional and personal strengths aligned with placemaking and brainstorm plans to implement projects within participant's respective communities. To conclude, everyone will reconvene as a large group to share highlights. Practice Implications: In both paid and voluntary roles, occupational therapists are well placed to contribute to placemaking with expertise in "person, environment and occupation". Placemaking provides a novel and relatively low stakes opportunity for our profession to put theory into action by contributing to projects addressing physical and mental health as well as social isolation. Conclusions: Given ongoing restrictions imposed by the pandemic, more people are spending time closer to home and within their community. Now is a strategic time for occupational therapists to get involved in making positive shifts in the landscape that contribute to improved community health and wellbeing.

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

Wednesday 3:00-3:25
Paper presentation: Not applicable | Occupational therapy education
Impact of OSCE participation on occupational therapy student learning
Karin Werther University of Alberta, Craig St Jean University of Alberta, Mary Roduta Roberts University of Alberta

Introduction: Objective Structured Clinical Examinations (OSCEs) are widely used in allied health education. Within our Occupational Therapy program, students complete four OSCEs and a Mental Health OSCE, which aims to implement learning as part of their growth from student- to entry-level clinicians. However, little is currently known about students' perceptions of the role of these exams in their clinical development and the impact on their learning. Objectives: [1] Understanding how OSCE participation enhances or limits student learning, and thereby their growth as clinicians-in-training. [2] Applying student perspectives to assist in tailoring OSCE learning opportunities to meet student needs. Methods: An action research approach guided data collection from 2 online focus groups with second and third year occupational therapy students (N=11). Students first brainstormed independently, then collaborated on a shared document to combine and organize their thoughts on the impact of OSCEs on their learning. Transcripts from the focus group will be analyzed thematically and triangulated with the student generated document. Results: Preliminary results indicate that OSCEs are opportunities to integrate knowledge, build on competencies, such as communication and clinical reasoning, confidence, and readiness for clinical practice. However, the anxiety and stress associated with the evaluation process can hinder demonstration of a student's true skillset. Recommendations for improvement include pass/fail grading and expanding opportunities for feedback. Conclusions: Participation in OSCEs has the potential to enhance student learning and readiness for practice. Grading approaches and feedback warrant consideration for improvement of OSCEs to support learning.

Key words | mots clés : *Teaching/education*

Wednesday 3:00-3:25
CSOS paper: Older Adult | Advocacy /Change agent
Situating occupations: A critical analysis of food-related occupations
Debbie Laliberte Rudman University of Western Ontario, Carri Hand University of Western Ontario, Colleen McGrath University of Western Ontario, Jami Mcfarland University of Western Ontario, Katherine Stewart, Jason Gilliland University of Western Ontario

Introduction: Although food-related occupations, spanning acquisition to consumption, are often taken-for-granted as routine aspects of daily life, access to the resources and conditions required to participate in such occupations in ways that promote health and social inclusion are inequitably distributed along various axes of difference, such as socioeconomic status and neighbourhood quality (Aldrich, Dickie & Laliberte Rudman, 2017; Beagan, Chapman & Power, 2018). Objectives: This presentation, drawing upon data from an ethnographic study conducted with older adult residents in 2 neighbourhoods in a mid-sized city, addresses how food-related occupations were situated within contextual features and implicated in processes of social inclusion and exclusion. Methods: This presentation presents a critical discourse analysis, informed by critical occupational science, of data generated using narrative interviews, GPS tracking, activities diaries, go-along interviews and photo elicitation interviews with 38 participants aged 65 to 87, specifically focusing on data segments addressing food-related occupations. Results: Social attributes, such as those tied to ability status and socioeconomic status, transacted with social, built, and socioeconomic features within neighbourhoods in ways that shaped inequitable possibilities for negotiating food-related occupations. At the same time, aging residents actively resisted inequities through strategic engagement in food-related occupations. Findings reveal complex ways food-related occupations and the spaces in which they occurred were implicated in processes of social inclusion and exclusion. Conclusion: Situated analyses of everyday occupations can increase understanding of how occupations are involved in reproducing and resisting inequities, and inform efforts to create more equitable, socially inclusive contexts.

Key words | mots clés : *Occupational science, Theory*

Wednesday 3:00-3:25
Poster defense: Adult | Primary care/Primary healthcare/Population health
The clinical profile of multimorbid clients receiving home care therapy
Amanda Mofina Queen's University, Jordan Miller Queen's University, Joan Tranmer Queen's University; Site Director for ICES, Wenbin Li ICES, Catherine Donnelly Queen's University

Introduction: Multimorbidity is the co-occurrence of two or more chronic conditions, wherein no one condition is considered the central disease. Individuals with multimorbidity access the health care system more frequently and are at an increased risk for poor health outcomes. Occupational therapists can provide interventions that address the complex functional needs of this population. Objectives: This study describes the characteristics of clients with multimorbidity discharged from an Ontario hospital across three groups: 1) clients referred to home care occupational therapy (OT); 2) clients who do not receive OT upon referral to home care, and 3) clients who do not receive home care. Methods: This

retrospective cohort study uses linked data from health administrative data sources housed within the Institute for Clinical and Evaluative Sciences (ICES). The cohort consists of individuals with multimorbidity, discharged from the hospital between 2007 and 2015. Descriptive statistical analysis will be used to describe personal and clinical characteristics across these three groups. Practice Implications: The results will provide a clinical profile of clients with multimorbidity who are receiving OT versus those who are not. These results could inform policy and clinical practice through clinical pathway development and implementation. Conclusions: This research will provide population-level data to understand the characteristics of clients with multimorbidity who are referred to home care OT after a hospital stay versus those that are not. Furthermore, these results will identify the characteristics of clients who may benefit from OT services and are not currently receiving OT.

Key words | mots clés : *Acute care, Community care*

Wednesday 3:00-3:25
Paper presentation: Community/Population | Mental health
A collaborative on-the-land trauma treatment program.
Rachel Schooley GNWT rachel.schooley@gmail.com, Kaitlynn Dewhirst GNWT/ Queen's University

Introduction: In the Fall of 2020, a partnership was formed between an occupational therapist (OT) and local Indigenous Governments to collaborate with a multidisciplinary team and Indigenous Elders to deliver an on-the-land trauma treatment program in the Northwest Territories (NT). This was the first-time occupational therapy was invited to be involved in a land-based treatment program. The purpose of the program is to decolonize trauma and addiction treatment programming, provide a holistic and culturally safe means of treatment with clients and ensure capacity building as a result of the collaborative nature of program development. The OTs role in mental health services is an emerging area in the NT. Occupational therapy is a profession aligned to work collaboratively and value traditional knowledge, balancing western and Indigenous ways of knowing and being; however, there have been few documented applications of OTs working with Indigenous communities in this way. Purpose: This paper outlines an OTs journey in developing relationships, participating in co-designing the land-based program and demonstrating the important role OTs can play in mental health services in the NT. Practice Implications: Understanding the important role OTs can play in mental health in a northern context is important for supporting the emerging role of OT in supporting the mental health of the residents. Conclusion: Through the lived experience of an OT co-designing an on-the land trauma treatment program, the role of occupational therapy working in mental health in the north is explored.

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

Wednesday 3:00-3:25
Paper presentation: Adult | Occupational therapy education
Vision loss competencies for Canadian occupational therapists: A Delphi study
Michelle Borgal Queen's University, Sarah Stadder Wise Queen's University, Rosemary Lysaght Queen's University, Julia Foster Kingston Health Sciences Centre

Rationale: Over 2 million Canadians live with vision loss, and incidence is increasing exponentially. Vision-related functional challenges can severely impact personal and social participation, producing strain for caregivers and burden on the health care system. Occupational therapists are increasingly encountering persons with vision loss as a primary and secondary condition in their practices. An earlier environmental scan revealed that occupational therapy programs in Canada have inconsistent education on vision loss-related competencies (i.e., knowledge, skills, and behaviours) to prepare students for generalist practice. Objectives: This study aimed to establish a competency framework related to vision loss and rehabilitation for occupational therapy generalist practice to guide curriculum development in Canadian occupational therapy programs. Methods: A modified Delphi process was used to conduct a three-phase approach to establishing vision loss competencies. Phase One was a national survey that asked a range of stakeholders to respond to a list of vision-loss competencies for occupational therapists that were drawn from the international literature. Phase Two asked occupational therapists to rate a refined competency list on a 3-point nominal scale to determine relevance to generalist practice. Phase Three will be a focus group with occupational therapists practicing in vision rehabilitation and other areas, with a goal of reaching consensus on competencies for generalist practice. Results: This is an in-progress study. Results from all phases will be presented at this session. Conclusions: This study will result in the first vision loss competency framework in Canada. Results will inform a national curriculum development guideline.

Key words | mots clés : *Blindness, Teaching/education*

Wednesday 3:35-4:00
Poster defense: Community/Population | Advocacy /Change agent
Approaches to Indigenous health within interprofessional education: A scoping review
Cara Aydin University of Toronto, Salina Mathur University of Toronto, Sylvia Langlois University of Toronto, Ruheena Sangrar University of Toronto

Introduction: Interprofessional education (IPE) activities consist of sessions where healthcare professionals (HCPs) and trainees work collaboratively to improve health outcomes. IPE activities are one approach to addressing health inequities of Indigenous communities. Occupational therapists (OTs) are skilled collaborators and communicators, situating them well for Indigenous IPE activity delivery. Given the diversity of research on how IPE activities address Indigenous health, a scoping review is warranted. Objective: The aim of this study is to explore the depth, breadth, and nature of existing literature on approaches to Indigenous health within IPE activities, with a particular focus on the role of OTs in leading these initiatives. Methods: A scoping review as guided by the Joanna Briggs Institute's methodology was used. Six databases were searched along with grey literature. Sources were screened, extracted using a data extraction form, and analyzed through a narrative summary. Results: Of 1486 sources, 50 were included following full-text review. IPE approaches to Indigenous health include using lecture-based instruction, fieldwork immersion experiences, reflexive activities, and storytelling. These methods of IPE serve as illuminating experiences for students and HCPs. Preliminary findings highlight the importance of involving Indigenous persons in each stage of IPE activity creation and delivery. OTs can be actively involved in leading and facilitating learning about Indigenous health within IPE activities. Conclusions: Findings from this study will provide students, HCPs, and educators with suggestions for collaborative approaches to Indigenous health education. Recommendations proposed from the findings

can inform OT involvement in future IPE events. Future research should explore the experiences of IPE activity leaders.

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

Wednesday 3:35-4:00
CSOS poster: Older Adult | Health and well-being
Analyzing the 'doing' of driving: Aging, personalization, and occupational performance
Nikita Malhotra McMaster University, Justine Sprague McMaster University, Ruheena Sangrar McMaster University, Brenda Vrkljan McMaster University

Rationale: For community-dwelling older adults, engaging in strategies that maintain their behind-the-wheel abilities is critical to out-of-home mobility. Emerging research suggests such strategies should be tailored to the needs of the older driver in question. Unfortunately, we have yet to fully understand how older drivers perform certain behind-the-wheel maneuvers. By analyzing actual performance, training can be further personalized to promote occupational engagement. Objectives: This study will examine the actual driving performance of older Canadians with the aim of further understanding occupational engagement and the notion of personalized occupational performance. Approach: A recent randomized-controlled trial captured the behind-the-wheel behaviours of 80 community-dwelling, older Canadians. Each participant drove a 12km standardized route in their own vehicle that was tracked using video and global positioning system technology. Using the video data, this secondary analysis of their driving performance will track similarities and differences across and within participants (e.g., mirror scanning, blind spot checks), which showcases highly personalized ways of performing occupations. Practice Implications: By analyzing actual performance, such as the driving behaviour of older drivers, OTs (OTs) and occupational scientists (OSs) will be uniquely positioned in our understanding of the personalized nature by which we engage and perform occupations. Conclusions: There exists an opportunity for OTs and OSs to contribute to the notion of personalized health through analysis of longstanding, everyday occupations, like driving. This study provides an example of how analysis of occupational engagement among Canada's heterogenous and growing aging population can inform our understanding of personalized healthcare with an occupational lens.

Key words | mots clés : *Occupational science, Older drivers*

Wednesday 3:35-4:00
Paper presentation: Child | Early childhood
Learning from Inuit perspectives on rehabilitation services for children
Janna MacLachlan University of Toronto, Andrea Andersen Government of Nunavut, Anita Benoit University of Toronto, Earl Nowgesic University of Toronto, Stephanie Nixon University of Toronto

Introduction: Canadian rehabilitation professionals working with children, including occupational therapists, are taught that developing specific skills and independence along a normative timeline is necessary to have good quality of life as adults. Such Western societal values may differ from those of Inuit, but Inuit have not been engaged in informing rehabilitation services. A lack of engagement of Inuit perspectives in rehabilitation services blocks opportunities for culturally safe service delivery and Inuit

self-determination. Objectives: To illuminate knowledge on how the rehabilitation interests of Inuit children can be understood and supported by foregrounding Inuit perspectives. Methods: This qualitative inquiry followed the Piliriqatigiinniq Model for Community Health Research (Healey & Tagak, 2014), and was supported by a decolonizing praxis approach. Twenty-five participants engaged in individual and group storytelling sessions. Analysis involved a holistic synthesis of data and included participatory engagement of community members. Results: Participant stories highlighted the importance of trusting relationships with rehabilitation professionals, drawing attention to the negative impacts of coloniality, Western professionalism and intersections with systems such as child welfare. Inuit worldview perspectives on child development were shared, with emphasis on understandings of inclusion and how children should be supported at their own pace. Needs for greater involvement of Inuit and the Inuktitut language in services were identified. Conclusions: Coloniality and eurocentrism negatively impact rehabilitation services offered to Inuit children. Culturally safe services and Inuit self-determination can be supported through relationship-based care, cultural humility and safety, anti-oppressive practice, and greater involvement of and governance by Inuit.

Key words | mots clés : *Occupational justice, Theory*

Wednesday 3:35-4:00
Paper presentation: Not applicable | General/Professional issues/Practice
Ergothérapeutes et soutien aux transitions occupationnelles durables: recension des écrits
Marjorie Désormeaux-Moreau Université de Sherbrooke, Maya-Kim Simard Université de Sherbrooke, Valéry Thibault Université de Sherbrooke, Caroline Duguay Université de Sherbrooke, Rosalie Corriveau Université de Sherbrooke, Vivianne Breton Université de Shebrooke

Introduction. Tant la source que les répercussions de l'actuelle crise écologique et climatique s'inscrivent dans une dimension occupationnelle. Par leur expertise, les ergothérapeutes peuvent se positionner comme acteurs clés, pour promouvoir la durabilité et soutenir des transitions occupationnelles respectueuses des écosystèmes et des capacités de régénérescence de la planète. Objectif. 1) Documenter la contribution potentielle des ergothérapeutes dans la promotion et le soutien aux occupations durables et solidaires. 2) Documenter des interventions ergothérapiques susceptibles de favoriser le respect des écosystèmes et des capacités de régénérescence de la planète. Méthodes. Une recension des écrits a été menée dans sept bases de données. Les articles recherchés devaient aborder la contribution des ergothérapeutes en lien avec la durabilité. Le contenu des articles retenus a été analysé à partir d'une grille de thèmes prédéterminés, laquelle s'est ensuite raffinée de façon inductive. Résultats. Sur les 108 documents identifiés, 38, publiés entre 2008 et 2020, ont été retenus. Deux grands thèmes s'en dégagent : la pertinence de la contribution des ergothérapeutes pour soutenir la durabilité (autrement dit, pourquoi) et la façon dont ils peuvent s'y prendre (autrement dit, comment).
Conclusion. Si la vaste majorité des documents retenus exposent la pertinence pour les ergothérapeutes de contribuer à la résolution de la crise écologique et climatique, force est de constater qu'en pratique, une telle posture demeure marginale. Alors que les ergothérapeutes tendent à une pratique fondée sur les résultats probants, davantage d'études doivent s'attarder à documenter l'implantation et l'évaluation d'initiatives y contribuant, pour inspirer et alimenter la pratique.

Wednesday 3:35-4:00
Paper presentation: Adult | Mental health
A systematic review of driving rehabilitation interventions for driving-related anxiety
Melissa Knott Western University, Sang Ho Kim Western University, April Vander Veen Western University, Erik Angeli Western University, Eric Evans Western University, William Knight Western University, April Ripley Western University, Tuan Tran Western University, Liliana Alvarez Western University,

Introduction: Driving enables independence and social participation (Hempel et al., 2017), yet 15% of drivers report moderate to severe driving-related anxiety, and 52% report mild anxiety symptoms (Taylor, 2018). Driving-related anxiety, which can persist for over 40 years, places drivers at risk for early driving cessation, occupational deprivations, reduced quality of life, and health decline (Taylor, 2018; Taylor et al., 2018; Fischer, et al, 2019). Driving rehabilitation interventions have the potential to benefit individuals experiencing driving-related anxiety. However, published evidence has neither been synthesized nor critically appraised. Objectives: Determine the impact of on-road, driving simulator, and virtual-reality exposure therapy (VRET) interventions, on the psychobiological responses, driving outcomes, and driving habits of drivers experiencing driving-related anxiety. Methods: A systematic literature review was conducted following a registered protocol (PROSPERO #CRD42020181810). Searches were completed in nine databases with keywords targeting anxiety and driving rehabilitation interventions. 1, 521 unique articles were screened by pairs of reviewers (N=8), 62 underwent full-text review, and 12 underwent final data extraction and quality appraisal (Downs & Black, 1998). Results: Twelve intervention studies included: two on-road (quality scores 2-4/10); six driving simulator (quality 6-8/10, or 22-25/32 for RCTs); and four VRET (quality 3-7/10). Conclusions: Seven of ten studies examining driving simulation or VRET interventions were assessed as high-quality and demonstrated increased driving frequency and significant reductions in psychological symptoms, subjective distress, and driving errors. On-road interventions were assessed as low quality. Additional research is needed to better establish the efficacy of on-road interventions and inform recommendations for clinical decision making.

Pre-recorded session
Paper presentation: Not applicable | General/professional issues
Decolonizing White occupational therapy's models and the practices they inform
Karen Whalley Hammell University of British Columbia

Introduction: For nearly two decades, some critical occupational therapy scholars have been striving to challenge the ableist, middle class, Western White neoliberal values and assumptions in which the profession is deeply rooted; and to highlight the theoretical imperialism, intellectual colonialism, ethnocentrism and racism manifested when models and practices informed by these assumptions are promoted, uncritically, throughout Canada and around the world. Objectives: To highlight the imperative to decolonize White occupational therapy and commit to equity and justice. Approach: This

presentation explores the linkages between capitalism, White supremacy, and the neoliberal ideology that informs Western occupational therapy. It explains the concept of systemic racism, examines the imprint of neoliberalism on our profession's dominant models, exposes the theoretical imperialism that is manifested in the uncritical promotion of culturally-specific models, and proposes some strategies to decolonize professional assumptions and models, and the practices they inform. Practice Implications: Models informed by the values of White privilege, buttressed by research among predominantly White middle class people, and produced by a cadre of privileged White researchers need to be recognized for what they represent: White occupational therapy. Because White occupational therapy's colonization of knowledge, as this is encapsulated in our models, serves to inform the profession's practices, these can be both irrelevant and oppressive. Conclusions: Occupational therapy's aspirations towards accountability require the profession to commit to decolonizing its models and practices. This requires researchers, theorists and educators to seek, centre, amplify and embrace the knowledge and perspectives of all those groups whose voices have been excluded.

Key words | mots clés : *Models, Theory*

Pre-recorded session
Poster defense: Community/Population | General/professional issues
Is a peer assisted learning placement a recipe for success?
Lisa Taylor University of East Anglia, Charmaine Chandler University of East Anglia

Introduction: The Rehabilitation Entrenched Community Integration Programme Evaluation (RECIPE) was a pilot evaluation project of a peer assisted learning model of practice placement for 1st and 2nd year pre-registration MSc Occupational Therapy students. The placement was created to facilitate the 1st and 2nd year students being on the placement at the same time, following the suspension of the 2nd year placements earlier in the year due to Covid-19. The planning of the RECIPE involved in depth collaboration between the higher education institute, the placement providers and the students. Objectives: To offer a virtual poster presentation providing a step by step guide to the organization, delivery and evaluation of the RECIPE project, detailing the collaborative working between education, the placement providers and the students. Approach: The virtual poster presentation will provide a visually engaging guide â€" using the RECIPE analogy, with ingredients, cooking instructions and the end results of the project. In depth questionnaires were completed by students and placement providers to evaluate their experiences of the RECIPE. The data was analyzed independently by a research assistant, using thematic analysis. Results: The RECIPE model provides an alternative model of student supervision and placement organization at a time of great pressure post Covid-19, helping to ease current and future placement capacity issues. Conclusions: The results will inform the planning of future placements for the Occupational Therapy profession and beyond, positively impacting on the placement capacity and efficiency of placement provider time, yet still providing valuable learning experiences for the students.

Key words | mots clés : *Fieldwork*

Pre-recorded session
Poster defense: Non-specific | General/professional issues

Impact of legislative changes in reporting medically at-risk drivers

Suzanne Lendvoy SK Health Authority, Amy MacLennan SK Health Authority, Susanne Adamson SK Health Authority, Leann Nixon SK Government Insurance, Meghan Moormann SK Government Insurance, Sanjida Newaz SK Health Authority

Introduction: Due to legislative changes, occupational therapists are reporting medically at-risk drivers to the driver's licensing body. The driver's licensing body recognizes the value of OT skills, knowledge and abilities. However, many occupational therapists struggle with reporting their clients to the licensing body, and have expressed that they would like to know if their reporting does have an impact on determining medical fitness to drive. Objectives: To analyze trends in reports submitted by health care professionals reporting medically at-risk drivers to the licensing body following changes to legislation. To determine OT's self-perceived confidence with respect to reporting medically-at-risk drivers. Methods: Using retrospective data from provincial driver licensing body, have collated data regarding the number of individuals reported and identified as medically-at-risk drivers by medical practitioners; both before and after legislative changes. Via survey, collected and collated data from occupational therapists regarding their self-perceived confidence level with respect to reporting medically at-risk drivers. Results: Data outlines the number of drivers identified as medically-at-risk. The survey results identify OTs' self-perceived confidence level in their reporting of medically at-risk drivers. Conclusions: This session will facilitate an understanding of the numbers of medically-at-risk drivers reported in the province. It will also help to identify OTs self-perceived confidence and the possible need for further education with respect to reporting medically at-risk drivers. This may have practice implications in terms of potential for further education of OTs in this area.

Key words | mots clés : *Assessments, Older drivers*

Pre-recorded session
Poster defense: Adult | Health and well-being
Le stress au travail, comment soutenir les adultes autistes?

Stacy Powell Université de Sherbrooke, Mélanie Couture, Marjorie Desormeaux-Moreau

Introduction : L'inadéquation entre les caractéristiques des adultes autistes, leur environnement et la nature de leurs occupations, notamment au travail, peut être source de stress. L'actuelle pandémie de la COVID-19 amène de nombreuses transitions occupationnelles (incluant à l'emploi) susceptibles d'accroître ce stress. Objectifs : (1) Identifier et documenter les sources, manifestations et conséquences du stress rencontrées par les autistes au travail. (2) Explorer les stratégies et outils technologiques de gestion du stress en contexte d'emploi. (3) Explorer les impacts sur le stress d'une transition occupationnelle engendrée par la pandémie due au Covid-19. Méthode : Une stratégie mixte dite enchâssée concurrente reposera sur la complétion d'un questionnaire électronique (échelle de mesure et développement). Ce questionnaire sera complété par trois groupes : travailleurs autistes (n≈30), «job coach» (n≈5) et supérieur immédiats (n≈2). La collecte de données s'échelonnera de 2020-11 au 2021-01. Résultats : Cette étude améliorera la compréhension des sources, les manifestations et les conséquences du stress au travail. Des recommandations seront formulées pour optimiser l'adéquation entre les caractéristiques des adultes autistes et leur contexte de travail (tâche et environnement), réduisant de ce fait le stress. Conclusion : Les résultats de cette étude contribueront à la participation et

l'épanouissement occupationnels au travail des adultes autistes. Une compréhension du stress comme résultante de l'interaction entre les caractéristiques de la personne et de son contexte de travail pourrait propulser des pratiques ergothérapiques susceptibles de favoriser l'accès et le maintien à l'emploi des adultes autistes.

Key words | mots clés : *Autism, Pandemic*

Pre-recorded session
Poster defense: Non-specific | General/Professional issues/Practice
Examining the spasticity management clinic profile: primer for occupational therapists
Andrew Lam University of Toronto, Fatima Khanam University of Toronto, Parvin Eftekhar University Health Network, Behdin Nowrouzi-Kia University of Toronto

Introduction: Spasticity is a significant contributor to pain and soft tissue contractures affecting mobility, sleep, and engagement in activities of daily living. Thirty-eight percent of patients develop spasticity within the first year after a stroke. Botulinum toxin A (BoNTA) is an effective and focal intervention to reduce muscle spasticity. There is a paucity of evidence about the effectiveness of traditional rehabilitation combined with BoNTA, the availability of the rehabilitation services, and the relationship between demographic variables and clinical characteristics and outcomes. Objectives: This study will examine patient health records at the Spasticity Management Clinic at the University Health Network to create a functional profile of spasticity, with a focus on demographic and clinical characteristics. Methods: A retrospective chart review will be conducted to analyze patient medical health records. In Phase I, a questionnaire to guide data collection will be created. In Phase II, demographic (e.g., age, gender, education level) and clinical (e.g., type of stroke, BoNTA dosage, functional status) information will be collected. Descriptive and inferential statistics will be applied to examine relationships between these factors. Practice implications: Findings from this study may improve service delivery and contribute to knowledge translation for improved rehabilitation services at the University Health Network's Spasticity Management Clinic. Data collected from this study may also enhance management decision-making and inform guidelines for funding allocation to improve the cost-effectiveness of care. Conclusions: Understanding the key demographic and clinical characteristics associated with positive outcomes is required to help patients return to functional independence.

Key words | mots clés : *Evidence-based practice, Stroke*

Pre-recorded session
Poster defense: Adult | Occupational therapy education
Teaching and evaluating an occupational perspective
Katie Lee Bunting The University of British Columbia, Susan Forwell University of British Columbia, Michelle Wheeler University of British Columbia, Kristen Honeybourne University of British Columbia

Introduction: Occupation has been widely accepted as the core domain of occupational therapy (OT) and an occupational perspective is accepted as central to occupational therapy practice. Research, primarily from the United States and Australia, has sought to understand how an occupational perspective is effectively taught. Unfortunately, there has been little research from a Canadian context

on educational approach to teaching an occupational perspective. Given national differences in occupational therapy core competencies and accreditation standards for education and curriculum indicators, having a Canadian perspective is essential. Objectives: To understand how, Canadian educators teach and assess an occupational perspective in entry level masters of OT programs. Methods: This study uses a descriptive qualitative design rooted in an interpretive approach. Participants are English-speaking educators purposively sampled from the 14 Canadian OT programs who identify as teaching occupation focused content. Online semi-structured interviews offer a method for rich, descriptive data collection. Interview transcription, familiarization, and thematic analysis (Braun & Clarke, 2006) structure the analysis. Trustworthiness strategies include an audit trail, primary research reflexive journaling, and member-checking. Results: Emerging themes will describe key pedagogies, guiding educational theories, learning activities, and methods of assessment educators use to teach an occupational perspective. Conclusions: This study provides an initial understanding of how an occupational perspective is taught to entry-level master's student occupational therapists in Canada. Findings are of value to educators and curriculum designers in OT education, and will contribute to the body of research that informs accreditation indicators for Canadian OT programs focused on education and curricula.

Key words | mots clés : *Evaluation, Teaching/education*

Pre-recorded session
Poster defense: Not applicable | Occupational therapy education
Occupational therapy and occupational therapy assistant collaboration in academia
Cristina Scionti, Alice Lee, Amy Belk, Raina Curran, Christen Engel

Introduction: When occupational therapy (OT) and occupational therapy assistant (OTA) students are provided with intraprofessional collaborative learning experiences during academia, they develop an understanding of role delineation, standards of practice, and supervisory strategies. Providing these experiences during the didactic portion of their programs can improve understanding of this relationship and establish better collaboration during fieldwork and practice settings. Objectives: OT/OTA programs are working to implement intraprofessional collaborative affiliation experiences. With this shift, it becomes imperative to design a tool that addresses educational efficacy. Methods: A valid and reliable survey was administered to Stanbridge OT and OTA students to assess their perceived competence of intraprofessional collaboration readiness. The survey measured student perceptions of OT and OTA intraprofessional collaboration either before or after completing an OT/OTA collaboration assignment. Results: A total of 67 survey responses were collected and results of this survey determined that OT and OTA students are more knowledgeable about their own scope of practice, most do believe collaboration is necessary in order for services to be effective, and most felt to a moderate degree or higher that their understanding of OT/OTA collaboration improved after completing the collaboration assignment. Conclusions: OT/OTA educational programs are responsible for preparing emerging practitioners to achieve entry-level competencies. By implementing this survey as an assessment tool, we hope that future research will look at ways to expand OT/OTA educational programs to increase collaborative opportunities between students while in academia to better equip them before entering the OT profession.

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

Pre-recorded session
Paper presentation: Non-specific | General/Professional issues/Practice
Dynamics and processes of digital healthcare teams: A scoping review
Dalia Muskat-Brown University of Toronto, Lian Yaffe University of Toronto, Sylvia Langlois University of Toronto, Paula Rowland University Health Network

introduction: COVID-19 has caused exceptional disruption to the healthcare system on a global front. For this reason, healthcare teams have been considering less traditional models of care in order that optimal services still be provided. As the pandemic comes to a cessation, health practitioners will likely explore elements of digital care, perhaps informing future practice. While research data on virtual care has been previously collected and summarized, a knowledge synthesis of interdisciplinary team approaches shows absence in the present literature. More specifically, research findings on the dynamics and processes of digitally enabled healthcare teams have not yet been synthesized and reported. Before exploring the value of online support provided by collaborative teams, it is first necessary that information concerning group dynamics be understood and made readily available. objectives: The purpose of this scoping review is to synthesize what is known about the dynamics and processes required of digitally enabled care teams, identify the membership on such times, and locate research gaps within the present literature. approach: This review will follow the Arksey and O'Malley (2005) framework by searching relevant journals, electronic databases, established networks, grey literature, monumental texts, and large-scale published evaluations. Inclusion and exclusion criteria will be outlined, and findings will be charted and synthesized for overall themes and key issues. practice implications: The findings of this review will clarify readers' understanding of digitally enabled healthcare teams, potentially informing future practice and influencing further research. conclusions: Conclusions will be communicated following the study's completion.

Key words | mots clés : *Interprofessional, Technology*

Pre-recorded session
Paper presentation: Not applicable | Occupational therapy education
Exploring the usefulness of a single-point rubric in Interprofessional Education
Iris Chao University of Alberta, Sharla King University of Alberta, Chad Gotch Washington State University, Mary Roduta Roberts University of Alberta

Introduction: Many interprofessional (IP) assessments and instruments were developed and utilized in Interprofessional Education (IPE) (Thistlethwaite et al., 2015). However, few studies regarding IPE are about the usefulness of instruments to support learning and teaching. To address this issue, a single-point rubric (Gonzalez, 2015) was developed and validated. A single-point rubric contains the expected performance criteria and a separated area to construct narrative feedback regarding the pros and cons of performance. Objectives: To explore whether the single-point rubric can support student learning and facilitators constructing effective feedback within the context of IPE. Methods: Four single-point rubrics were developed and piloted in a large-scale foundational course and an elective course. Kane's validity framework (Kane, 2013) guided the validation process. Validity evidence collected included data from

stakeholder surveys, interviews/focus groups, and completed single-point rubrics. Results: We collected 66 surveys and interviewed 10 participants and reviewed a total of 219 single-point rubrics. The facilitators could use the single-point rubric to provide structured and potentially helpful feedback. The students agreed with the feedback received and could identify performance strengths and weaknesses. However, some facilitators did not provide suggestions for improvement to students, which is one of the principles of using the rubric. With suggestions from the facilitators and students' engagement with the feedback, students could utilize the directions for improvement in future IP learning. Conclusion: The single-point rubric has the potential to help construct helpful narrative feedback to students, and students could use the feedback to support future learning.

Key words | mots clés : *Evaluation, Interprofessional*

Pre-recorded session
Poster defense: Adult | Health and well-being
Social media vs. in-person social support for family caregivers
Alison McBride University of British Columbia, Natalie Gant University of British Columbia, Helena Maskall University of British Columbia, Julie Robillard University of British Columbia, William Miller University of British Columbia, Somayyeh Mohammadi University of British Columbia

Introduction: Family caregivers of individuals with spinal cord injury experience a substantial life change, and often take on the role of the caregiver, becoming responsible for everyday care. Caregiving tasks include support for activities of daily living, such as assisting with self-care, managing finances, monitoring for pressure injuries, and emotional support. Change in caregiver role creates physical, emotional or financial consequences. With the rise of social media use, there is potential for caregivers to access social support not only in person, but online. Objectives: This study investigates the reasons family caregivers use social media vs. in-person support and the comparative impact these forms of support have on the mental, physical and emotional well-being of caregivers. Methods: Quantitative measures including the Online Social Support Scale, Satisfaction with Life Scale, Depression, Anxiety and Stress Scale, Caregiver Burden Inventory and others, will be used to examine caregiver well-being and social support. This information will be analyzed using correlational and regression analyses. A semi-structured interview will be conducted to gather the perspectives of family caregivers, and interpreted using inductive thematic analysis. Results: We anticipate that social media is used frequently for social support, and that it has a positive impact on caregiver well-being. Conclusions: The information gathered from this study can provide valuable insight on how caregivers of individuals with spinal cord injury use social media and in-person social support. This will guide the future development of online resources to better support caregivers' well-being.

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

Pre-recorded session
Paper presentation: Non-specific | General/Professional issues/Practice
Rapid Reviews: Improving accessibility of technology-based research findings
Megan MacPherson University of British Columbia, Anna Braunizer, Cara Sadiq, Emma Smith, Rosalie Wang

Rationale: Technology can support individuals of all abilities to engage in meaningful occupations. With the COVID-19 pandemic, applications of technology (e.g., remote healthcare delivery) have proven essential. Considering the pervasiveness of technology in practice, enhancing clinician competency through accessible research uptake is critical. Rapid reviews, a form of evidence synthesis, can facilitate timely delivery of research evidence to OTs, policy makers and others. Objectives: The CAOT Practice Network: Technology for Occupation and Participation aims to develop and implement a mechanism for producing rapid reviews to improve accessibility of technology-related research. Approach: Members within the network reviewed relevant literature and guidelines and developed a customizable rapid review mechanism. Review steps include: topic nomination by an OT; search strategy development; eligibility screening; data extraction; data synthesis/dissemination. Unlike systematic reviews, only a single reviewer will be involved in that data screening and extraction (25% dual reviewers) – thus decreasing review time substantially. A review on "ethical guidance in assistive technology practice for OTs" was piloted to refine the mechanism. Practice implications: Direct outcomes of this project include a sustainable rapid review process where every review is designed and implemented by OTs. The reviews themselves will build capacity in research and critical appraisal among those OTs conducting them. Conclusions: Rapid reviews can advance OT practice by producing evidence in a resource-efficient manner that keeps pace with evolving technologies. Development of this rapid review mechanism within the Practice Network will provide relevant and actionable evidence in a timely manner, promoting evidence-based decision making among OTs/policy makers.

Key words | mots clés : *Assistive devices, Technology*

Pre-recorded session
CSOS paper: Non-specific | General/Professional issues/Practice
Predictable life transitions: A conceptual framework from an occupational perspective
Olivia Kaehn University of British Columbia, Kathleen Tweedlie University of British Columbia, Katie Lee Bunting University of British Columbia, Susan Forwell University of British Columbia

Rationale: Conceptual frameworks for predictable life transitions have been developed in other disciplines, particularly the social sciences. While there is a significant body of research on predictable transitions from an occupational perspective, there is no conceptual framework. This impedes a cohesive understanding of the occupational impact in predictable life transitions. Objectives: To develop a conceptual framework on predictable life transitions from an occupational perspective that was informed by the occupational literature. Methods: Jabareen's (2009) qualitative method for developing a conceptual framework informed the building of this framework. The method included reviews of the occupational therapy and occupational science literature, using peer reviewed and grey literature from OTDBASE, CINAHL, Web of Science, ProQuest, and NDLTD databases. Iterative analysis of the literature and mind mapping allowed for a synthesis of the overarching concepts into a conceptual framework. Reflexive journals supported trustworthiness. Results: Concepts emerged from 35 published and unpublished papers on predictable life transitions. Five concepts and seven sub-concepts emerged to shape the conceptual framework of predictable life transitions from an occupational perspective. The five concepts are: external context, complexity, social connections, transitions are personal, and transitions shape occupations. Conclusions: This study presents the first conceptual framework on

predictable life transitions grounded in the occupational literature, which brings a contextualized understanding of how transitions shape occupations, how individuals use occupations through transitions, and how transitions change and impact individuals and their environment. This work can inform occupational therapists when working with clients through predictable life transitions.

Key words | mots clés : *Models, Occupational science*

Pre-recorded session
Poster defense: Child | Mental health
Novel autism spectrum disorder tools: Emotion recognition and perspective taking
Meagan Hopkins University of British Columbia, Cailey Armeneau University of British Columbia, Yael Mayer University of British Columbia, Parisa Ghanouni University of British Columbia, Tal Jarus University of British Columbia

Introduction: Autism spectrum disorder (ASD) is a neurodevelopmental disorder characterized by socio-emotional deficits, including emotion recognition (ER) and perspective taking (PT). Despite the prevalence of ASD in Canada (1 in 66 children), there are no valid and reliable tools available to objectively measure these deficits in children with ASD, prompting the development of two novel tools (Government of Canada, 2018). Objectives: To establish the validity and reliability of two novel tools measuring ER and PT. Methods: 20 typically developing children and 19 high functioning children with ASD (ages 6-12) were invited to participate in this study. Each participant completed three tools twice, separated by a 30-minute break. For each trial, the emotion recognition task (ERT, established tool) and two novel tools were administered in a randomized order. Data analysis is underway. The Intraclass Correlation Coefficient (ICC) and Cronbach's alpha will be calculated to determine internal consistency, Pearson's r and the ICC will be used to assess test-retest reliability, and a two independent samples t-test will be used to establish construct validity. Concurrent validity will be assessed for the ER tool by comparing scores to the ERT, using Pearson's r. A three-way repeated measures ANOVA will be used to analyze differences between and within groups for emotion type, intensity level, and response time. Results: We anticipate that data analysis will support the validity and reliability of the novel tools. Conclusions: Findings will enable clinicians and researchers to objectively measure ER and PT in children with ASD, supporting evidence-based assessment and intervention.

Key words | mots clés : *Assessments, Autism*

Pre-recorded session
Paper presentation: Older Adult | Chronic conditions
Patient passport models for older adults living with chronic disease.
Sagal Mohamed Queen's University, Sukhnoor Bindra Queen's University, Bhawan Katora Queen's University, Dorothy Kessler Queen's University

Introduction: Self-management of living with a chronic disease is increasingly important and a growing area of occupational therapy practice. Patient passports are an innovative example of a tool that allows information to be stored, maintained, and controlled by a patient to support self-efficacy. Objectives: This scoping review was conducted to (1) identify models and specific features of patient passports for

older adults with chronic conditions and (2) explore the health related outcomes of using a patient passport with regard to self-management. Methods: This review was based on the Arksey and O'Malley scoping framework. A search was conducted in CINAHL, PsychINFO and Medline. Relevant peer-reviewed studies were identified using search terms related to common chronic conditions, patient passports, and older adults. Studies describing a patient passport model and the patients' user experience were included. Two reviewers independently screened studies. Disagreements were resolved through discussion with an independent third reviewer. Results: Thirty-five studies met the inclusion criteria. Twenty-two passports were in a paper format and thirteen were electronic. Passports designed for diabetes (13) and cancer (8) were the most common. Five core characteristics of patient passports were identified: patient contact information, medical information, condition specific information, laboratory test results, and personal diary. The most frequent health-related outcome observed was improvements in self-care through increased knowledge. Conclusions: We have identified five structural features that can inform the development of patient passports to support the ability to self-manage living with a chronic condition. Further research is required to determine the effectiveness of patient passports.

Key words | mots clés : *Evidence-based practice, Models*

Pre-recorded session
Poster defense: Child | Advocacy /Change agent
Safe transportation of children with physical disabilities: A provincial survey
Emma Melo University of Toronto, Bianca Serapiglia University of Toronto, Sarah Davidson Holland Bloorview Kids Rehabilitation Hospital, Rebecca VanderBurgh Holland Bloorview Kids Rehabilitation Hospital, Amy McPherson Bloorview Research Institute, Timothy Ross Bloorview Research Institute

Introduction: The safe transportation of children with physical disabilities is essential to their participation in daily activities. However, clinicians are not always informed on this topic and provincial legislation for transporting these children lacks clarity. Both can lead to potential safety risks. Objectives: To explore how parents of children with physical disabilities in Ontario are currently transporting their children. Research questions: (1) How are families accessing/using child safety restraints? (2) What are some challenges that caregivers experience when transporting their children? And, (3) How is access to transportation impacting participation in daily activities for these children? Methods: Using an anonymous online survey, data will be collected from parents across Ontario about the methods they use to transport their children with physical disabilities, as well as their experiences and knowledge about their children's safe transport. Implications: Anticipated study outcomes include: (1) identifying areas where clinicians can usefully engage in discussions with parents about children's transport safety; (2) understanding the needs of parents for equitable access to child safety restraints; (3) providing caregivers with additional knowledge and resources for safe transportation; and (4) supporting advocacy efforts for updated standards of care regarding transportation of children with disabilities. Conclusion: Exploring how caregivers are transporting children with physical disabilities may help occupational therapists, other professionals, and families advocate for safer transport for children with physical disabilities.

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

Pre-recorded session
Poster defense: Older Adult | Chronic conditions
Stroke telerehabilitation in a rural location: Exploring perceptions of stakeholders
Jessica Irish University Of British Columbia, Annu Sharma University of British Columbia, Delphine Labbe, Sacha Arsenault, Katie White, Brodie Sakakibara

Introduction: Stroke survivors living rurally experience many unmet rehabilitation needs after returning to community-living. As a result, it is common for stroke survivors to experience secondary events and reduced participation in meaningful daily occupations. Telerehabilitation, defined as the use of technology to provide rehabilitation services from a distance, is a viable and timely solution, especially in the context of physical distancing due to the COVID-19 pandemic. However, minimal research exists on the use of telerehabilitation among rural stroke survivors. To understand the challenges and facilitators to providing telerehabilitation to stroke survivors living rurally, the perceptions of stakeholder groups receiving, delivering, and implementing telerehabilitation services must be considered. Objectives: This study will interview stakeholders from all levels of service delivery to develop an understanding of the perceptions, barriers, and opportunities of telerehabilitation for stroke recovery. Method: Following an interpretive description approach, 20 qualitative interviews will be conducted with stroke survivors (n=5), caregivers (n=5), clinicians (n=5), and health administrators (n=5), to obtain their experiences and perceptions of stroke telerehabilitation. Narratives will be examined using inductive thematic analysis. Results: We anticipate that participants will acknowledge the lack of access to proximal stroke rehabilitation, its impact on participation in daily occupation and recovery, and identify challenges and facilitators to optimize the provision of telerehabilitation to rural locations. Conclusions: Recognizing each stakeholder's perceptions and opinions of delivering and receiving stroke telerehabilitation will provide a holistic understanding of service needs. Important findings from this study will help inform the future development of a rural stroke telerehabilitation strategy.

Key words | mots clés : *Stroke, Technology*

Pre-recorded session
Paper presentation: Older Adult | Health and well-being
Identifying acceptability criteria of locator devices for person with dementia
Antonio Miguel-Cruz University of Alberta, Noelannah Neubauer University of Alberta, Christine Daum University of Waterloo, Christa Spenrath University of Alberta, Lili Liu University of Waterloo

Introduction: A growing number of Canadians are living with dementia. Strategies to manage dementia-related wandering and reduce the risks of getting lost include physical and chemical restraints and environmental modifications. However, these strategies can restrict one's participation in meaningful occupations and reduce quality of life. Locating devices can manage safety risks while also supporting engagement and independence among persons living with dementia (PLWD). Yet, there is no clear, standardized approach to assess usability (including acceptance and adoption) of locating devices for PLWD and their care partners. Objectives: To identify factors related to acceptance of locating devices, and that are important to PLWD, care partners, service providers, and technology developers. Methods: Qualitative descriptions were used with five focus groups and data were subjected to conventional

content analysis. Trustworthiness strategies included multiple data sources, data verification for accuracy, and peer debrief. Results: Eleven factors emerged as critical aspects in the usability of locating devices. Existing tools do not adequately consider privacy and stigma associated with these devices. Therefore, the usability of locator technologies would be enhanced if privacy and stigma are addressed. This could in turn, have an influence on practitioners, such as occupational therapists who advocate for use of locating technologies. Conclusion: The factors identified have informed the creation of a usability scale for locating devices for PLWD care partners, and practitioners.

Key words | mots clés : *Dementia, Technology*

Pre-recorded session
Poster defense: Community/Population | Health and well-being
Catalyzing service providers' potential to enhance immigrants' occupational possibilities
Simarbir Khangura, Matthew So, Suzanne Huot University of British Columbia

Introduction: Canada is experiencing record levels of immigration; however, immigrants and refugees experience occupational disruptions upon arrival and during integration processes. Community service providers play a central role in shaping the occupational possibilities that are made available to immigrant populations. Yet, few studies have examined the experiences of the community service providers from an occupational perspective. Objectives: This study investigated community service providers' experiences related to providing of occupational opportunities for immigrants. The following questions were addressed: How do community service providers understand their role as mediators of occupational possibilities for immigrants? What barriers and facilitators influence their ability to fulfill this role? Methods: Interviews were conducted with 20 key informants from organizations that provided services to immigrants or the general public. Each interview lasted between 45-60 minutes, and was thematically analyzed using familiarization, coding, and theme generation. Results: Emerging themes highlight the following key considerations: community service providers experience tension in their role as mediators of occupational possibilities; barriers at the systemic and local levels prohibit service providers from fulfilling this role; enhanced collaboration between organizations and supporting grass-root initiatives is needed. Conclusions: Analysis of the barriers and facilitators helped to identify the strengths and gaps present in the current model of service provision in Metro Vancouver. Resulting themes inform the potential role for occupational therapists to work alongside community service providers in supporting their role as mediators of occupational possibilities for immigrants.

Key words | mots clés : *Occupational justice, Occupational science*

Pre-recorded session
Poster defense: Not applicable | General/Professional issues/Practice
Occupational therapists' perceptions of gender and its influence on care
Aleah Johnson University of Toronto, Zahra Karmali University of Toronto, Sally Lindsay Holland Bloorview Kids Rehabilitation Hospital

Introduction: As gender-based inequalities significantly affect care, occupational therapists (OTs) must possess the knowledge and competencies to understand gender difference, and apply this awareness to

ensure gender-sensitive, equitable practice. While previous qualitative studies have identified limited gender-sensitive awareness amongst clinicians, a comprehensive understanding of the specific ways in which OTs perceive gender and their ability to provide equitable care is needed. Objectives: To explore what is known from the current literature about OTs perceptions of gender and how it affects the provision of care in clinical practice. Methods: A scoping review will be conducted using the Arksey and O'Malley Framework (2005). A search strategy will be developed using gender and occupation-focused terms and will be conducted in the following databases: CINAHL, Medline, EMBASE, and PsycINFO. Two independent authors will select articles for full-text review based on title and abstract. Articles will be selected based on level of evidence and relevance, and data will be summarized into themes. Practice implications: Findings will highlight ways in which OTs should continue to practice while revealing areas in need of improvement pertaining to gender. It will promote the need for a gender-sensitive approach to ensure it is incorporated into client-centered practice. Conclusions: This study will identify the need for OTs to advocate for their clients as stigma, discrimination and health inequities continue to exist within society. Recommendations will be suggested to improve health outcomes for all clients and to better integrate gender issues into education, training and practice, to ultimately reduce gender-related health disparities.

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

Pre-recorded session
Poster defense: Adult | Chronic conditions
Self-Management for Amputee Rehabilitation using Technology (SMART): An eHealth solution
Anna Baines University of British Columbia, Lisa Odland University of British Columbia, Elham Esfandiari University of British Columbia, William Miller University of British Columbia

Introduction: Self-management programs can potentially increase self-efficacy and reduce functional limitations (i.e. challenges with self-care and mobility) for people with lower limb amputation (LLA). Previous studies examining the effectiveness of self-management programs on self-efficacy, mood, and musculoskeletal function have had promising results but are limited in number. Self-Management for Amputee Rehabilitation using Technology (SMART) is an online platform consisting of four educational modules providing information on problem solving and taking action. SMART includes mental and physical wellness, residual/prosthetic limb management, use of a prosthesis, and daily activities. Objectives: The purpose of this study is to understand user experiences of the four-week SMART program including satisfaction, ease of use, and perceived usefulness of the online self-management program. Methods: Participants with a unilateral LLA who have completed all SMART modules will complete a brief perceived usefulness questionnaire and participate in a semi-structured interview to provide details on their experiences. Results: Perceived usefulness ratings will be presented as mean scores alongside an in-depth analysis of common themes arising from user experiences with SMART. Quantitative and qualitative data will be considered together to determine the acceptability and feasibility of SMART. Conclusions: This study will contribute to filling the gap in evidence for self-management programs with individuals with LLA. Participant experiences with SMART will inform the further refinement of the program. SMART will provide information remotely and allow participants to learn in an effective postoperative time frame regardless of geographical boundaries.

Key words | mots clés : *Orthopaedics, Technology*

Pre-recorded session
Paper presentation: Adult | Primary care/Primary healthcare/Population health

Introduction: Current practice guidelines suggest that multidisciplinary primary care teams should manage patients' chronic pain using a biopsychosocial multimodal approach. Recent literature has demonstrated the expanding scope of occupational therapy i
Occupational therapy role in managing chronic pain in primary care

Research

Key words | mots clés : *Community care, Interprofessional*

Pre-recorded session
Paper presentation: Child | Occupational therapy education
A Web-based "Family-Centered Care Training Program" for pediatric rehabilitation clinicians
Richard Huynh McGill University, Deanna Casanova McGill University, Vanessa Girard McGill University, Michelle Paquin McGill University, Lora Salvo Jewish Rehabilitation Hospital, Lise Mayrand Jewish Rehabilitation Hospital, Barbara Mazer McGill University

Introduction: Family-Centered Care (FCC) is considered the best-practice for the rehabilitation of children with disabilities. However, FCC is not widely implemented in clinical practice. To facilitate the implementation of FCC and increase its accessibility to pediatric rehabilitation clinicians, an in-person FCC training program was adapted into a web-based platform. Objective: To create a web-based training program for pediatric rehabilitation clinicians to improve their knowledge and skills when providing FCC. Methods: The Knowledge to Action cycle was used to develop the web-based program. A scoping review, focus groups, clinician and caregiver interviews, and a pilot project with 13 clinicians and 12 caregivers were conducted. Thematic analysis was used to identify facilitators and barriers to using FCC. Knowledge gathered from each step was reviewed and then combined to create the content for the web-based training program. Practice Implications: The web-based training resource offers theoretical and practical information regarding FCC, as well as information on facilitators and barriers to its implementation in clinical practice. This resource can contribute to practice change in pediatric clinicians, specifically regarding caregiver engagement. Conclusions: The web-based program was designed to address the barriers to the application of FCC: lack of a model, reflexivity required by clinicians to change their practice, and lack of institutional support. Several advantages of the website include: the program synthesizes and presents information from various sources, it provides clinicians with useful resources and tools for practice, the structure follows a logical progression, and it capitalizes on the advantages of web-based learning.

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

Pre-recorded session
Poster defense: Not applicable | Occupational therapy education

Interprofessional education and collaborative competency development: A realist evaluation

Rabina Raveendrakumar University of Toronto, Salihah Faroze University of Toronto, David Rojas University of Toronto, Sylvia Langlois University of Toronto

Introduction. The Collaborator, as defined in the Profile of Occupational Therapy (OT) Practice in Canada, is a key role enacted by occupational therapists when they utilize shared decision-making practices to collaborate with other healthcare professionals. To foster the development of this interprofessional competency in healthcare graduates, the University of Toronto (UofT) created an Interprofessional Education (IPE) curriculum. However, the means by which UofT's IPE curriculum develops interprofessional collaborative competencies in OT graduates is not yet known. Objectives. The objective of this study is to identify the mechanisms and outcomes of UofT's IPE curriculum that contribute to OT graduates' collaborative competency development. This study also aims to identify the contexts in which this development occurs, and why such patterns are observed. Methods. This study employs a mixed-methods realist evaluation, which is an approach underpinned by program theories hypothesizing that specific contexts and mechanisms result in distinct outcomes. Qualitative and quantitative data from 2018 and 2019 OT graduates' surveys, assessments, interviews and reflection papers are used to test and refine initial program theories. Results. Analysis reveals six outcomes that contribute to interprofessional collaboration: role clarification, team functioning, interprofessional communication, interprofessional conflict resolution, collaborative leadership, and advocacy. The analysis identifies mechanisms that enable and disable the development of each outcome, and tests initial program theories to aid refinement. Conclusions. The findings of this study have the potential to inform IPE curricula development, promote collaborative competency development in future OT graduates, and direct future IPE evaluation research.

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

Pre-recorded session
Poster defense: Adult | Primary care/Primary healthcare/Population health
Implementation considerations for optimizing inpatient cardiac rehabilitation: A scoping review

Sahana Sathakaran University of Toronto, Kuan-Wen Wang University of Toronto, Marina Wasilewski Sunnybrook Health Sciences Centre, Sander Hitzig Sunnybrook Health Sciences Centre, Adam Saporta Sunnybrook Health Sciences Centre

Introduction: Cardiovascular diseases (CVD) are the second leading cause of death in Canada, accounting for 20.7% of all mortality. Inpatient cardiac rehabilitation (ICR) is a comprehensive model of care, with evidence supporting its importance in CVD management. Although several systematic reviews have evaluated the effectiveness of ICR, they have yet to investigate the implementation considerations that can optimize the delivery and effectiveness of ICR. Objectives: To synthesize and describe the implementation considerations that influence: (a) the organization and delivery of ICR; and (b) the impact of ICR on patient outcomes. Methods: We will undertake a scoping review following the guidelines outlined by Levac et al (2010). We will search MEDLINE, PsycINFO, EMBASE, CINAHL, and AgeLine databases from January 1, 2000 to present. Data extraction will be guided by the Consolidated Framework for Implementation Research (Damschroder et al., 2009) and data will be synthesized narratively. Practice Implications: Occupational Therapists (OTs) are involved in many areas of ICR

including service adaptation for cardiac conditions, self-care activities, lifestyle modifications, risk management, and enhancing quality of life. This scoping review will enable OTs to champion and implement ICR models that are evidence-based and follow best practices. This will serve to enhance ICR's potential to meaningfully improve the health and wellbeing of patients. Conclusion: Our review can inform strategies and policies that enhance the delivery of ICR by OTs and other healthcare professionals, thereby leading to better patient outcomes. *The first and second authors contributed equally to this project.

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

Pre-recorded session
Poster defense: Community/Population | Health and well-being
Stakeholder perspectives on the implementation of inpatient cardiac rehabilitation
Victoria Culnan University of Toronto, Serena Egidio University of Toronto, Adam Saporta Sunnybrook Health Sciences Centre, Marina Wasilewski Sunnybrook Health Sciences Centre, Sander Hitzig Sunnybrook Health Sciences Centre

Introduction: Cardiovascular disease places a large burden on the healthcare system in Canada and cardiac rehabilitation (CR) has been proven to be effective in patients' recovery to reduce subsequent morbidity and mortality. Despite these benefits, the value of inpatient CR is not fully recognized nor is inpatient CR widely available. Consequently, it is imperative to better understand how inpatient CR can be optimized to meet the needs of cardiac patients and identify ways to better integrate it across the system. Objectives: This study aims to gain insight into stakeholder experiences and perspectives of a current inpatient CR program. Methods: A qualitative descriptive approach will be used to interview former CR inpatients and clinical staff members. Using purposive sampling, we will recruit 24 individuals per stakeholder group. We will conduct interviews with participants using a semi-structured interview guide to gain insight into the inpatient CR program's strengths, and suggestions for optimizing access and uptake of the current program. An inductive approach to thematic analysis will be adopted to analyse the participants' responses. Practice implications: This study will identify significant aspects of an inpatient CR program that are successful, and areas that can be improved. It will also provide direction on how to optimize the underlying interprofessional model of care, which importantly includes the role of occupational therapists. Conclusions: Based on the findings from this study, a new integrated CR care model, which will include the participation of occupational therapists, will be established to enhance patient outcomes.

Key words | mots clés : *Evaluation, Interprofessional*

Pre-recorded session
Poster defense: Chronic conditions | Clinical reasoning, Evidence-based practice
Introduction : Les ergothérapeutes doivent s'engager dans de nouveaux rôles et adapter leurs pratiques afin de résoudre les situations de soins complexes auxquelles ils font face auprès d'une proportion grandissante de leur clientèle. Objectifs : Cette ét
Pratiques ergothérapiques auprès d'une clientèle présentant une complexité de soins

Research

Pre-recorded session
Poster defense: Community/Population | Mental health
Psychometric analysis of the Workplace Outcome Suite.
Julia Lenjosek, Alanna Saffran, Ivan Steenstra, Behdin Nowrouzi-Kia

Introduction: Workplace mental health issues including anxiety, depression, and burnout are among the top concerns for many organizations. According to the Mental Health Commission of Canada, one in five Canadians experiences a mental health problem each year. Employee assistant programs (EAPs) may offer a solution to address mental health problems. There is a current need for a standardized assessment to evaluate the validity of these interventions. The Workplace Outcome Suite (WOS) is a psychometric tool that collects EAP specific outcome data. The initial WOS survey consisted of a 25-item questionnaire. User feedback indicated that this item was too lengthy for regular use in routine outcome monitoring. In response, the WOS 5-item was created. While there is literature supporting the effectiveness of the WOS 25, there is no evidence to support whether the revised version is valid. Objective: To establish the validity of the WOS 5 as a tool that measures EAP specific outcome data. Sample: 1900 cases were obtained from EAP providers that implement the WOS 5 or 25. The sample is made up of employees from North America and contains both men and women, predominantly American women. Methods: Secondary data analysis will be used to evaluate the validity of the WOS 5. Pre- and post-test scores from the WOS 5 will be analyzed in comparison to WOS 25 scores. To compare these two versions, quantitative data analysis will include descriptive statistics (e.g., means and standard deviations) and inferential statistics (e.g., regression, structural equation modelling, and confirmatory factor analysis). Results/Conclusions: To be determined (study is ongoing).

Pre-recorded session
Paper presentation: Older Adult | Primary care/Primary healthcare/Population health
Developing inclusive eHealth tools for caregivers
Karine Latulippe Université McGill, Christine Hamel Université Laval, Dominique Giroux Université Laval

Introduction: eHealth, or any digital tool that we use to take care of our health, has become an integral part of our lives. However, a segment of the population can't use these methods, which results in social health inequalities (SHI). Objective: To understand how to develop inclusive eHealth tools that combat rather than amplify SHI. Methodology: Following a systematic review, seven conversion factors were explored in an empirical study through participant observation in the context of development of an eHealth tool to support caregiver's help-seeking process. Caregivers are people at risk of SHI. Results: The involvement of persons at risk of SHI in the development of an eHealth tool for caregivers appears to be a key conversion factor through which the other factors are realized. Other conversion factors are: 1) providing physical, technical, and financial access to eHealth; having regard for future users' (FU) 2) digital health literacy, 3) technological skills, 4) help-seeking process, 5) learning abilities, and 6) cultural

context. Conclusion: From a social justice perspective, researchers and designers have a role to play in ensuring that the tools developed in eHealth are inclusive and accessible to all. This project highlights conversion factors that can foster this solidarity and informs researchers and designers about an eHealth tool development process that considers people at risk of SHI.

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

Pre-recorded session
Poster defense: Community/Population | Advocacy /Change agent
Understanding the needs of disadvantaged workers
Rebecca Gewurtz McMaster University, Jesse Sonoda McMaster University, Nazlim Bilgi McMaster University, Charlotte Ebsary McMaster University

Introduction: Legal Aid clinics are designed to improve access to justice for those who cannot afford legal assistance. Among the 72 legal aid clinics in Ontario, there are three that focus specifically on work and employment issues such as workers' compensation and occupational health and safety. There is an opportunity for occupational therapists to work with legal aid clinics to better meet the needs of low-waged and disadvantaged workers. Objectives: This project aims to explore the needs of clients served by three legal aid clinics in Ontario specializing in work and employment issues, in order to identify opportunities for partnership and collaboration between clinics and with other health and social services. Methods: Using a mixed-method design, we have partnered with three legal aid clinics to gather information about the experiences and ongoing needs of clients through an online survey. A sub-sample of survey participants will be invited to participate in semi-structured interviews about their experiences and ongoing support needs. Quantitative data will be analyzed to identify the needs of participants by calculating descriptive statistics for all variables. Qualitative data will be analyzed inductively, to identify themes related to the needs and experiences of participants, how needs have been met, and opportunities for partnership and collaboration. Results: The findings will focus on the needs of clients and opportunities for occupational therapy practice. Conclusions: Working with legal aid clinics presents a unique opportunity for occupational therapists to connect with marginalized populations and address complex occupational needs.

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

Pre-recorded session
Poster defense: Older Adult | Environment
Assistive technology at home: Perspectives of older adults and caregivers
Kayla Licari University of Ottawa, Rebecca Nadler University of Ottawa, Brigitte Lorenz University of Ottawa, Emilie Gagnon University of Ottawa, Bruce Wallace Bruyère Research Institute, Heidi Sveistrup Bruyère Research Institute

Introduction: The use of assistive technology (AT), in this study defined as computer-based technology using sensors and wireless communication between devices, is a promising means of increasing the autonomy and safety of older adults who are aging in place. There is limited research regarding the thoughts and feelings of users for whom the technology is designed. Objectives: We sought to

understand older adults' perspectives regarding the use and adoption of AT within their homes. Methods: A quasi experimental study was conducted using semi-structured interviews to explore the opinions of 11 older adults and their perceived facilitators and barriers to using AT. Interview transcripts were analyzed thematically. Results: Data analysis revealed six themes: aging in place, privacy, marketing and design, equity, impact on caregivers, and impact on the healthcare system. Conclusions: As increasingly sophisticated AT emerges and becomes a staple component of aging in place, occupational therapists will need to integrate this larger role of introducing and explaining AT devices to their clients into their practice as well as ensuring that clients with AT devices are using them to their full potential to maximize their own safety and autonomy. It will be increasingly important for occupational therapists to develop competencies with innovative technologies in order to facilitate the uptake of appropriate AT among older adults and their caregivers.

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

Pre-recorded session
Poster defense: Child | Chronic conditions
Predictors of Elbow Flexion Contractures in Brachial Plexus Birth Injury
Karen Ogilvie* Department of OS&OT, University of Toronto, Allison Mah* Department of OS&OT, University of Toronto, Karen Klar Division of Plastic and Reconstructive Surgery, Hospital for Sick Children, Kristen Davidge Division of Plastic and Reconstructive Surgery, Hospital for Sick Children; Department of Surgery, University of Toronto, Howard Clarke Division of Plastic and Reconstructive Surgery, Hospital for Sick Children; Department of Surgery, University of Toronto, Emily Ho Department of OS&OT, University of Toronto; Division of Plastic and Reconstructive Surgery, Hospital for Sick Children

Introduction: The onset of an elbow flexion contracture (EFC) in a child following a brachial plexus birth injury (BPBI) may have significant impacts on their occupational performance and family functioning. While the prevalence of EFC is high in school-aged children, little is known about its emergence and trajectory. EFC development in early childhood is a parental stressor and predicting its development will help plan for rehabilitative needs during school-aged years for this chronic condition. Objectives: To identify the prevalence and predictors of EFC in early childhood. Methods: This is a retrospective cross-sectional study of children with BPBI < 4 years. Data abstraction of 183 health records were reviewed to determine client-, condition-, and treatment-specific outcomes. Based on current etiological evidence of EFC (C5, C6 ± C7 vs. C5-C8 ± T1 injury, C5/C6 root avulsion, and C7 root avulsion), a logistical regression will be conducted to determine the predictors of EFC development. Practical Implications: Identifying EFC predictors in early childhood will inform early occupational therapy intervention to manage and potentially prevent progression of EFC development to better enable occupational performance and goals. Knowledge of EFC predictors, severity, and formation will inform parental education regarding anticipated BPBI outcomes and rehabilitation needs in childhood, thus alleviating caregiver stress and burnout. Conclusions: Understanding the predictors and likelihood of EFC development in early childhood of this chronic condition will help reduce parental stress, which positively impacts family functioning. Furthermore, it will guide healthcare decisions and early intervention to support occupational development in children with BPBI.

Key words | mots clés : *Clinical reasoning, Hand therapy*

Pre-recorded session
Poster defense: Child | Chronic conditions
Cortical gray matter volume in children with developmental coordination disorder
Myrah Malik University of British Columbia, Donna Lang, Tamara Vanderwal, Jill Zwicker

Introduction: Developmental Coordination Disorder (DCD) is a common neurodevelopmental disorder that affects a child's ability to learn motor skills and perform daily activities. Over half of children with DCD also have co-occurring attention deficit hyperactivity disorder (DCD+ADHD). How the brain differs between these two groups of children is under-studied, and more importantly, if and how the brain changes with occupational therapy intervention is largely unknown. Objectives: (1) To compare cortical gray matter volume in children with DCD, DCD+ADHD and typically-developing children; and (2) to examine and compare neuroplastic changes in cortical gray matter volume in children with DCD and DCD+ADHD following Cognitive Orientation to Occupational Performance (CO-OP) intervention; and (3) to determine whether changes in cortical gray matter are related to improvements in motor skills. Methods: Good quality MRI scans for voxel-based morphometry have been obtained from 21 children with DCD, 17 children with DCD+ADHD, and 16 typically-developing children. Cortical gray matter volume will be compared across groups using ANCOVA and before/after intervention for DCD groups using repeated measures ANCOVA (controlling for age, sex, and intracranial volume). Regression analysis will be used to examine the relationship between cortical gray volume changes and motor skills. Results: Data analysis is underway. We expect that children with DCD (+/-ADHD) will show lower cortical gray matter volume compared to typically-developing children, but that cortical gray matter volume will increase after CO-OP intervention. Conclusions: This novel study will provide insight in understanding why children with DCD+/-ADHD struggle to learn motor skills and how the brain changes with intervention.

Key words | mots clés : *Developmental coordination disorder, Evidence-based practice*

Pre-recorded session
Paper presentation: Non-specific | Chronic conditions
Revising the CAOT position statement on obesity and healthy occupations
Annelies VanderLaan University of Alberta, Emily Russell University of Alberta, Pam Hung University of Alberta, Mary Forhan University of Alberta

Introduction: The first position statement on obesity in healthy occupation was published in 2010 and revised in 2015. Since then, a great deal of work has been published, warranting a review of the current statement. Objectives: The purpose of this study is to review the current literature on how we, as Occupational Therapists, can work with individuals living with obesity. These updates will inform a revision of the present CAOT position statement to communicate social and health issues important to the occupational therapy profession. Methods: A team led by occupational therapy students conducted a systematic search of the gray and peer-reviewed literature to identify current evidence for the content of the existing position statement on obesity and healthy occupation. Additionally, a review of the current evidence in best practices for obesity prevention, treatment, and management was reviewed,

along with contributions to research in the area of obesity published by occupational therapy scholars. Occupational science journals were also searched and reviewed. The final version of the statement will include edits suggested by persons living with obesity, occupational therapists, and occupational therapy students. Results: This project will result in a position statement based on current evidence that aligns with the current mission and vision of CAOT and current practice models in Canada. Conclusions: A revised position statement will contribute to building capacity for occupational therapy services and consultations that can contribute to enabling occupation in persons living with obesity and contribute to policies that address weight bias.

Key words | mots clés : *Evidence-based practice, Obesity*

Pre-recorded session
Paper presentation: Non-specific | Occupational therapy education
Collecting validity evidence for CASPer: Predicting OSCE and fieldwork performances
Mary Roduta Roberts University of Alberta, Cecilia Alves Medical Council of Canada, University of Alberta

Introduction: Strong academic and interpersonal skills are required to succeed in health professions programs and clinical practice. CASPer is an online situational judgement test that assesses one's personal and professional characteristics (Dore et al., 2017). Although CASPer has been shown to predict medical students' future performance, this has yet to be explored within an occupational therapy program. Objective: To explore the validity of CASPer and GPA for predicting performance on objective structured clinical examinations (OSCEs) and fieldwork. Methods: CASPer scores, GPA, scores from four OSCEs, and ratings from two fieldwork evaluations (Competency Based Fieldwork Evaluation; CBFE) were obtained for one cohort of occupational therapy students. Associations between CASPer, GPA, OSCE scores and CBFE competencies were examined using Spearman's Rank Order correlation. Incremental validity of CASPer over GPA was examined using hierarchical multiple regression. Scores from two final fieldwork placements will be obtained and analyzed by March 2021. Results: With the exception of the first OSCE, CASPer consistently demonstrated higher correlations with the remaining OSCEs and both fieldwork placements when compared to GPA. The highest correlations were found between CASPer and the CBFE competencies from the second placement: clinical reasoning (rs=0.33, p<0.05), professional interactions and responsibility (rs=0.27, p<0.05), communication (rs=0.26, p<0.05), and professional development (rs=0.30, p<0.05). For variables with significant associations, CASPer improved the prediction of performance over and above GPA, on average, by 4%. Conclusion: This study provides initial validity evidence for the use of CASPer, versus GPA, as a predictor of future performance requiring the use non-cognitive practice-based competencies.

Key words | mots clés : *Assessments, Teaching/education*

Pre-recorded session
Paper presentation: Adult | Primary care/Primary healthcare/Population health
Activities of daily living recommendations invade adult obesity practice guidelines
Pam Hung University of Alberta, Mary Forhan University of Alberta

Introduction: Adults seeking treatment for obesity have reported that they are rarely asked by primary care practitioners about managing activities of daily living(ADL). Adults with obesity have also expressed embarrassment in sharing their challenges, particularly with personal care, potentially preventing access to occupational therapy. Clinical and research contributions by occupational therapists lead to the inclusion of a chapter focused on enabling participation in ADL in the revised Canadian Adult Obesity Clinical Practice Guideline. Objective: The objective of the chapter is to provide evidence based recommendations to help identify areas that patients may need to have addressed for participation in ADL and obesity treatment activities. Methods: Multi-disciplinary executive and steering committees, including patient advisors, provided oversight for the guideline development. The chapter authors developed ADL-related research questions. The McMaster Evidence Review and Synthesis Team(MERST) supported literature searches in MEDLINE and EMBASE databases for peer-reviewed articles. DistillerSR software was used to select and review articles. Chapter authors screened articles for relevance and selected articles underwent full-text review for methodological quality using the Shekelle approach. Recommendations and key messages were developed with review by MERST and approval from the executive committee. External peer review of the chapter, including health care professionals and persons with obesity, was conducted. Practice implications: Falls, mobility, self-care, and accessibility are areas that practitioners should consider when discussing ADL with adults with obesity. Conclusion: Integrating recommendations to address ADL, along with tips on referring to occupational therapy in a National guideline has the potential to increase referrals to services that patients may not typically access.

Key words | mots clés : *Evidence-based practice, Obesity*

Pre-recorded session
CSOS paper: Mental health | Mental health, Occupational science
Introduction: Social connectedness is the sense of belonging that comes from having mutual relationships with others in the community â€" this is frequently missing from the lives of people diagnosed with serious mental illness. Objectives: This study exp
Careless generosity: The transformative power of freely-given relationships in mental health

Research

Key words | mots clés : *English*