REPORT

16th ENOTHE Annual Meeting, Stockholm

14th of October 2010 - 17th of October, 2010
Karolinska Institute, Stockholm Sweden.

Organised by


Co-ordinated by

ENOTHE office, Amsterdam and Copenhagen
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Chris van der Molen (GGZ inGeest partner VUmc, Amsterdam, The Netherlands), Luc Vercruysse (Hogeschool-Universiteit Brussel, Belgium)

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Monika Samuelsson, Karolinska University Hospital(KUS), Anders Kottorp, Karolinska Institutet(KI), Annika Öhman, Karolinska Institutet, KUS and KI, Susanne Guidetti, KUS and KI

By Anders Kottorp, Annika Öhman Karolinska Institutet, Stockholm.

Appendix presentation 5.6

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Ton Satink, Hogeschool van Nijmegen

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Helena Hemmingsson (reg. OT, PhD, Professor of Occupational Therapy, Department of Societal and Welfare studies, Faculty of Science, Linköping University),

Helene Lidström (reg. OT, MSc, PhD candidate, Division of Occupational Therapy, Department of Neurobiology, Care Sciences and Society, Karolinska Institutet, Stockholm, Sweden and Folke Bernadotte Regional Habilitation Centre, Uppsala University Hospital, Uppsala)
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6.1 About the needs of disadvantaged people

*Céline Beddeleem, Naaike Delcour, Sharon Messiaen, HOWEST Kortrijk, Belgium*

6.2 Educational Inclusion: The perspective of Somali young people in Cardiff.

*Sara Redclift, Jessica Mullins, Cardiff University, Wales*

6.3 How homeless people’s situation influences their capacity in performing activities and which actions to be undertaken from an occupational therapy point of view.

*Leyla Linoubli and Emma Cederlund (Faculty of Health Sciences, Occupational Therapy Program, Linköping University, Sweden)*

6.4 Child camp with an activity on sensibility on poverty

*Jasmien Stevens, Kimberly Vanmarcke, Mieke Vandekerckhove (Hogeschool West-Vlaanderen Departement Renaat de Rudderlaan, Belgium)*

6.5 Occupation therapy and poverty in the work (re)integration

*Mieke Lemmens and Catherine Eyben (PHL, Hasselt, Belgium)*

6.6 The Irish Travelling Community: An investigation into their struggle to combat poverty and social exclusion in daily life.

*Suzanne Leclair, Ciara FitzGerald, University college Cork, Ireland*
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7.1 From distribution to contribution  
Liesbeth van Hoffelen, Hanna Bortier, Silke Jacobs, Iris Keulemans, Artesis Hogeschool Antwerpen, Belgium  
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7.2 Arcade 84  
Hannah Worrod, Laetitia Monney, Luisa Somazzi, Roberta Sacchetti (EESP – Lausanne, Switzerland)  
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7.3 Relearning the writing and reading skills to disadvantaged people  
Flore Moerman, Nathalie Dhuyvettere, Ruth Knockaert (Howest department Hiepso, Belgium)  
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7.4 Daily Life in WEIBERWIRTSCHAFT  
Irene Fritz, Martina Groissberger, Martina Hinterleitner, Sonja Hofer, Martina Jagersberger, Leonie Köppl, Anna Lehofer, Lisa Mezger, Katharina Moser, Katharina Ottinger, Barbara Scherabon-Csizy (University of Applied Science in Wr. Neustadt, Austria)  
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7.5 Starting a durable cooking activity  
Lisa Houzet, Ine Moentjens, Lore Vanstaen (Howest department Hiepso, Belgium)  
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Jonas De Maet, Joke De Vos, Ellen Hollemaert, Isabelle Straetmans, Ann Van de Velde, Sarah Verplaetse (University College Ghent, Belgium)  
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Sharon Braem, Maayke Lagae, Ine Oosterlinck (HOWEST KOKTRIJK, Belgium)  

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8.3 Promote Healthy Eating Amongst Young Mothers within the Valleys of South Wales

Hayley Jones, Charlotte Owen, Julia Lloyd, Kristen Osmundsen, Melissa Williams, Rachael Stockes-Richardson, Miriam Page and Lavonah Ditlhako (Cardiff University)

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8.4 Changing Perspectives

Sarina Oepping, Maria Fendel, Dorothea Bockhold, Magdalena Tobergte, Rahel Kruse, Lea Pieck (ETOS, Germany)

Appendix presentation 8.4

8.5 Daytime from People in A Closed Asylum Center

Caitlyn Decramer, Elien Derucyk, Stefanie Derucyk, Lore Koelman, Leen Swaels (KHBO, Belgium)

Appendix presentation 8.5

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Pauline Merminod, Juliane Brêchet, Raphaëlle Donnet, Damiano Salvi, David Krebs (EESP, Switzerland)

Appendix presentation 9.1

9.2 The « Quartiers Solidaires », a community outreach in favour of the elderly

Caroline Burnand, Cyrille Caille, Anne Deblock-Belamy, Sandrine Gindre, Camille Vuagniaux (EESP, Switzerland)

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9.3 An exploration into the current inclusion opportunities for adults with Autism Spectrum Disorder in Scotland from an occupational therapy perspective

Ali Davison, Ali McIntyre, Aileen Duff (Queen Margaret University, Edinburgh)

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9.4 Investing emotionally in one’s home: a way of avoiding social exclusion and precariousness of psychotic people

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9.5 Poor? – I don’t want to be poor! How do children view poverty?
Natalie Kremer, Maike Keßel, Jenny Nutsch, Annika Uhrig, Hogeschool Zuyd, Heerlen, Netherland

9.6 OT Intervention in Foster Families (OTIFF)
Alba Pérez, Paula Gómez, Arlet López, Cris Iglesias, Pau Escolar, Maria Beneyto, Cristina López, Laia Arias, Marta Téllez and Alba Soler (Escola Universitaria Creu Roja, Spain)

10.1 “Feel It”
Cornelia Höring Doris Baumgartner, Natascha Bujnow, Johanna Gaigg, Sonja Hammerschmied, Manuela Rampetsreiter, Alexandra Stix, Bettina Nevosad (FH Campus Wien, Austria)

10.2 Living with debts! Interview with persons concerned
Alexandra Kaineder, Angela Seyss-Inquart, Miriam Thauerböck, Stefan Kollmann (Akademie für Ergotherapie, LNK Wagner Jauregg Linz, Austria)

10.3 A good life in Denmark
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11.6 Combating Social Exclusion through Empowerment
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12.1 Your Head of Department is questioning your membership of ENOTHE. Which arguments would you bring forward in order to keep your membership of ENOTHE?

12.2 You have some work to prepare. You go to the ENOTHE web site what would you like to find there, that would help you in your preparation?

12.3 You are a newly elected board member of ENOTHE. Identify three actions that could contribute to the continuing development of OT in Europe?

12.4 In which ways are students involved in the ENOTHE network in your institution?

13.0 General Assembly

14.0 Student forum

Saturday 16th of October 2010

15.0 Facts and Fiction on Global Health

Professor Hans Rosling, Karolinska Institutet

15.1 The threat of poverty and social exclusion in a life with long term impairments. Some considerations on the roles and responsibility in the future.

Jette Bay, Chairman of the Health Committee of the Danish MS Society

15.2 Lived experience and functioning in everyday life following stroke.

Professor Kerstin Tham, Head of Department of Neurobiology, Care sciences and Society, Karolinska Institutet

15.3 Panel discussion - Occupational therapy in the future. The social arena versus the medical?
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(OT in refugee camps, OT in prison, OT in homelessness, OT in schools to prevent social exclusion, OT to support knowledge of societal habits and routines in the new culture)

Gaynor Sadlo, Brighton University, Hanneke van Bruggen, Hogeschool van Amsterdam, Hans Jonsson, Karolinska Institutet, Lena Borell, Karolinska Institutet

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15.4 Summary of conference.

Barbara Piskur, Hogeschool Zyud, Chris Mayers, York St. John University, York, Sarah Quinn, Trinity College, Dublin, Sissel Alsaker/Horghagen, Trondheim University, Staffan Josephsson, Karolinska Institutet

Appendix presentation 15.4

15.5 Welcome presentation for the 17th Annual ENOTHE meeting in Ghent, Belgium

Appendix presentation 15.5
Thursday 14th of October 2010

1.0 Words of welcome by ENOTHE board representative

Stephanie Saenger

1.1 Words of welcome on behalf of the Karolinska Institutet

Prof. Kerstin Tham, Head of the Department of Neurobiology, Caring sciences and Society, Reg OT, Karolinska Institutet

Appendix presentation 1.1

1.2 Introduction of the EU Theme of the Year & Introduction of the European interdisciplinary COPORE project

COPORE Project coordinator Hanneke van Bruggen, Hon. Dscie, FWFOT, Executive Director of ENOTHE, Hogeschool van Amsterdam, NL

Introduction

The European Commission has dedicated 2010 to the European Year for Combating Poverty.

Since the enlargement of Europe poverty and cohesion problems have increased, 16% of the EU population currently live at risk of poverty. It is expected that their number will rise, not least as a consequence of the financial crisis and the effects this will have on the labour markets and the society.

The European Network of Occupational Therapy in Higher Education (ENOTHE) together with other Health, Educational, Social Sciences and Clients’ networks applied successfully for a European wide project- “Competences for Poverty Reduction” (COPORE). This consortium has drawn the attention on health inequalities, related to disadvantaged groups and developed competences and approaches in higher education focusing on affordable health care, health literacy and empowerment of clients and their community in order to reduce poverty.

Objectives

- Increase awareness about the relationship between poverty, disability, health inequalities, occupational deprivation and social exclusion
- Develop a shared set of understandings
- Increase knowledge of possible approaches to action
- Involvement of communities
- Present recommendations defined for the competences of health, social and educational workers
Description

The consortium studied and gathered good practice of tailored prevention and health promotion for people at risk of social exclusion and integrated care models.

Special emphasis has been put on the Community Oriented Primary Care (COPC) approach and the relation with social services. Through this focus professionals and the local population attached to health and social centres automatically have more attention for poverty problems.

The following actions have been undertaken:

- Identification of projects of good practices in social inclusion
- Develop a common language on social determinants of health and indicators of poverty
- Increase knowledge and experience of possible approaches to action
- Develop a shared set of competences, specific learning outcomes and teaching and learning approaches

The multi-disciplinarity of the project must tackle the multi-dimensional aspects of poverty through integrated approaches.

Appendix presentation 1.2
1.3 COPORE conference award winning student presentations:

1.3.1 Information and Communication Technology: making/breaking a gap

Natalia Rivas Quarneti, Occupational Therapist; Tania Gómez Sachèz, Social educator; Ines Viana Moldes, Psychologist, University of Coruña

Appendix presentation 1.3.1

1.3.2 Ending child poverty: take up the challenge

Boryana Stancheva, Elitsa Velikova, Sonya Petrova, University of Russe – Bulgaria

Appendix presentation 1.3.2

1.4 Why should we care for our fellow humans?

Professor Stefan Einhorn, Karolinska Institutet, Stockholm

Appendix presentation 1.4

2.0 Parallel workshops

2.1 Workshop 1 – Knowledge of OT and Science

Occupational science as a theoretical foundation for practice in the social arena

Hans Jonsson, Senior Lecturer, Division of OT, Karolinska Institutet, Sweden.

In the development of Occupational Science a number of possible arenas has emerged; i.e. community development, preventive health and social/political projects. The aim of this workshop is twofold;

-to discuss the potential of OS in new arenas and

-to debate limitations and possible shortcomings of our perspective. Examples of projects will be given and in the discussion we expect both visions for the future and self-critical comments regarding limitations of the occupational perspective.

Appendix presentation 2.1
2.2 Workshop 2 – OT and professional reasoning and partnership

CORPORE competencies – combating social exclusion. Does their implementation demand changes in the educational settings/systems?

*Sandra Rowan, COPORE-partner & TUNING expert, Skills for Health, UK.*

Poverty is an issue in all European countries. The causes of poverty are many, and as occupational therapists we have a role to play in combating the causes of poverty and the outcomes of poverty.

This year long project was supported by a range of professions and NGOs. They have worked to develop a set of core competences and a resource of good practice examples concerned with combating poverty in Europe.

This workshop did:

- present the competences developed in the COPORE project
- explore their relevance to occupational therapy education
- consider the potential impact on the delivery of the occupational therapy curriculum

*Appendix presentation 2.2*

2.3 Workshop 3 – Research and development

Rethinking an individualistic focus of Occupational Therapy

*Staffan Josephsson (Division of Occupational Therapy, Institution of Neurobiology Caring Sciences and Society, Karolinska Institutet, Sweden), Sissel Alsaker (Trondheim University College, Norway) & Soemitro Poerbodipoero (Hogeschool van Amsterdam, The Netherlands)*

Occupational therapy services have traditionally been focusing on individuals and their occupational functioning. Consequently assessment and evaluation of services has been focusing on individual functioning. However during the last decades there has been a growing awareness both in theory and in clinical models of the impact of social structures processes and values on individuals occupational functioning.

Drawing from studies on the everyday life of people with disabilities in Sweden, Norway and The Netherlands the aim of this workshop is to problematize and discuss traditional individual focus of interventions and outcome-measures of occupational therapy and generate possible ideas and suggestion for future development of occupational therapy assessment and evaluation.
Appendix presentation 2.3

2.4 Workshop 4 – OT and professional reasoning and partnership

COPORE Competencies- Fighting Poverty. Reflections from COPORE conference in relation to OT practice and reasoning

Dikaios Sakellariou (Cardiff University) Sarah Kantartzis (Hellenic Association of Occupational Therapists)

COPORE (Competences for Poverty Reduction) is a consortium of health, social and educational networks combating poverty and social exclusion that was formed in the European Year for Combating Poverty and Social Exclusion. In Europe today there are 90 million people facing poverty, while there are great health inequalities between rich and poor, with disabled people being particularly vulnerable. Poverty has been recognised as the single most important determinant of health.

This consortium is managed by ENOTHE and its main aim is to produce competences for health, education and social work students and practitioners on how to contribute to poverty reduction strategies. The project aims to bring together all major actors in the field, identify good practices, and develop a common language on social determinants of health and indicators of poverty.

The aims of this workshop were to:

• Present a brief overview of COPORE and its background
• Present and then in small groups discuss the list of competences that have already been produced. In particular discuss the relevance of these competences for educational curricula and social realities across Europe, and ways to incorporate them in education.

Appendix presentation 2.4

2.5 Workshop 5 – Research and development

What we owe our Clients? Reflections about occupational justice and social inclusion.

Kristof Uvijn, Lector Ergotherapie, Departement Gezondheidszorg / Vesalius, University College Hogeschool Gent, Belgium

The last decades it is natural to talk about participation and social inclusion in relation to the lack of occupational justice. A fair society gives people the opportunity to do what they think they have to do or to
do what is important to them. A disturbing factor is the implicit assumption that the pursuit of participation is ‘the’ correct goal for all our clients.

It is however not always clear what clients expect (from us and or the society) or what we owe them.

Attention to occupational justice not only opens the debate about methodology, visions concerning the future ... the fields where we (OT’s) are necessary. Attention to occupational justice also opens a normative debate.

(1) How defines the society (including persons with disabilities and/or social needs) justice? Do they expect equal opportunities; is there an overall need for social inclusion? Or is a compensation fair enough (and what is a fair compensation)?

(2) Occupational justice is related to social justice. If occupational therapy further evolves into the social model and pays more attention to the way a society is organized and how individuals get a chance to participate (cfr. the definition of handicap and health by the WHO), we have to define who belongs to the group of people which is entitled to equal chances and/or extra compensation.

Today, there is a lack of knowledge concerning the moral intuitions and opinions about healthcare, social inclusion, participation, positive discrimination, equality and opportunities. We need this information if we want to give a correct interpretation to our ‘new’ task.

Appendix presentation 2.5

2.6 Workshop 6 – Knowledge of OT and Science

Organising and hosting an intensive programme

Professor Chris Mayers: York St John University, UK (c.mayers1@yorksj.ac.uk), Fenna van Nes: Hogeschool van Amsterdam, Netherlands  (f.a.van.nes@hva.nl)

The facilitators of this workshop have successfully applied for funding for two Intensive Programmes entitled: ‘Disseminating Research Findings to Users – practitioners, clients, patients, carers’. Each lasted two weeks and was attended by students and lecturers from Amsterdam, Antwerp, Coventry, Gothenburg, Heerlen, Prague and York. Both were hosted at York St John University.

Information about the content of these two programmes was shared with participants at the ENOTHE conference in A Coruna and there were many requests afterwards for more information on the process of application, organising and hosting an Intensive Programme. This workshop will enable information to be shared and discussed. It will cover the whole process from an initial idea to the final evaluation. There will also be discussion about future Intensive Programmes as individuals with common interests meet at the workshop.

The overall aim was to aid the development of further successful applications.
Appendix presentation 2.6

After Lunch workshops

2.7 Workshop 1 – Combating isolation and social exclusion among elderly by health promoting group activities.

Annikki Arola, Arcada University of Applied science, Finland

The increase numbers of elderly in society will be a challenge in the future and the Finnish society will have a challenge in being able to offer services for the elderly population. The goal in social- and health care system is to support elderly to live at home as long as possible and the number of places in institutional care will decrease. In this situation elderly has the possibility to continue to live in their home environment but we have to be sure that this living is meaningful and healthy. There is a risk that a decline in physical capacity leads to the situation where elderly can’t take part in activities in society and this could lead to isolation and through that also social exclusion. There are reports about elderly living in their homes totally isolated from the outside world.

The aim for this project was to create health promoting programs which enables elderly to live a qualitative life in their home environment. First we had to identify how elderly themselves perceived their possibilities to participate in meaningful occupations. Specific research questions was:

- Which occupational areas do elderly perceive as important?
- Which occupations can elderly still participate in and which occupations are problematic?
- How satisfied are they with their way to carry through these occupations?

The results from this initial project would be used to create program with the aim to increase elderly person’s possibilities to participate in meaningful occupations and by that decrease the risk for social exclusion and isolation.

Appendix presentation 2.7

3.0 Panel discussion

A panel discussion was held simultaneously with representatives from each of the following:

Workshop leaders of the day;
Members of the ENOTHE-connected work groups;
COPORE-representatives; and,
ENOTHE board members.

The three panels discussed how the outcomes of the workshops can be applied in the future education of OT students in the field of combating poverty and social exclusion.

ENOTHE board members chaired the panel.
Friday 15th of October 2010

4.0 Opening ceremony

Sofia Vikström, President ENOTHE

4.1 Words of welcome

Anders Kottorp, Lecturer, Head of Division OT, Karolinska Institutet

Lena Haglund, President of the Swedish Association for Occupational Therapists (FSA)

4.2 Everyday technology and societal inclusion

Professor Louise Nygård, Karolinska Institutet
4.3 The spiritual domain of occupation

Professor Chris Mayer, York St John University

Appendix presentation 4.3

4.4 A tribute to Gary Kielhofner an outstanding scholar in Occupational Therapy

Ass. Professor Hans Johnsson, Karolinska Institutet

Appendix presentation 4.4

5.0 Parallel workshops

5.1 Workshop 1 - Community-based practice in Occupational Therapy: follow – up from ENOTHE internet questionnaire

Ruth Zinkstock, Hogeschool van Amsterdam, Ann Johansson, Jönköping’s Högskola, Sandra Schiller, HAWK, Hildesheim, Roana Dickson, Benedicte Dubois, AnneMie Engelen, University College, Ghent

Recent discussions (e.g. at the ENOTHE conference 2009 in A Coruna) have shown that there are different understandings of community-based occupational therapy practice/community development in different European countries and amongst practitioners and lecturers with different degrees of interests in this field. At the 2009 meeting a consortium of six Occupational Therapy teachers was awarded funding to carry out a survey with regards to current OT education and practice in community-based Occupational Therapy/community development in member countries. The questionnaire was sent to all ENOTHE member institutions in April 2010. This interactive workshop will provide participants with the opportunity to discuss the results of the survey in detail and to explore the potential implications of the findings for Occupational Therapy education and practice.

At the end of this workshop participants

- gained an understanding of the opinions and practice of the ENOTHE membership with regards to community based occupational therapy
- discussed the potential impact of the survey findings on OT education programmes
- shared some of their own experiences with regards to teaching or working within a community – based practice context
- identified some recommendations for the further development of this area of practice
Appendix presentation 5.1

Appendix presentation 5.1.1

Appendix presentation 5.1.2

*It was preferable that participants at this workshop had some experience of teaching and/or working within community – based practice.*

5.2 Workshop 2 – Path guide

The roadsign project: Include client in the Occupational Therapy Education

*Lena Haglund (Swedish Association for Occupational Therapists, Associate Professor in Occupational Therapy, Linkoping University) and students*

The aim with the module was to support the student to develop communication and interaction skills and to develop conscious use of self and to make clients visible and support their influence in the education.

Eleven clients from the mental health service in the community are working as path guide and they are all trained contain assessment of student, how to give feedback and the path guide role.

During semester 2 each student individually interviews a client regarding his/her ability to manage the daily life occupation. During the interview a tutor is present. The interview takes approximate 20 minutes, and directly after the interview the student gets feedback from the client and the tutor.

In semester 4 two students lead an occupational therapy, activity-based group consisting of three to five clients. The students choose and plan the session. The session runs for 50 minutes, and a tutor is present. Directly afterwards, the students get feedback from the clients and the tutor.

Appendix presentation 5.2

5.3 Workshop 3 – Quality in qualitative studies

*Lena Borell (Karolinska Institutet) Gaynor Sadlo (University of Brighton) Sissel Alsaker (Trondheim University) Staffan Josephsson (Karolinska Institutet) Louise Nygard (Karolinska Institutet)*

New and important knowledge in occupational therapy is developed through qualitative research conducted in research and independent studies by occupational therapy students around the world. The history of occupational therapy is full of good examples of studies of a qualitative nature that have moved
the horizons of awareness of, for example, what it is like to live with a disability, to new levels. Occupational therapists can learn about peoples’ ways of living and experience the world through conducting and taking part in qualitative studies.

However, the development of education in occupational therapy research requires a critical approach and a continuous discussion about methodological approaches. This type of critical discussion is essential for the development of these methodological approaches.

This workshop aimed to contribute to a discussion about quality in qualitative studies, and included some examples of studies conducted within occupational therapy and occupational science. It sought to highlight the differences in quality issues seen from a quantitative perspective, on one hand and a qualitative perspective on the other hand. The workshop overall provided teachers with some recent ideas about quality developments in qualitative research.

**Appendix presentation 5.3**

### 5.4 Workshop 4 – EEE4 all project (Euro-education: Employability for all)

*Barbara Piskur, Hogeschool Zuyd, Annika Lindh, Hälsouniversitetet Linköping, Emma Niklasson, Hälsouniversitetet Linköping, Claire Craig, Sheffield Hallam University, Elke Hedwig Kraus, Alice Salomon University, J.E. van Bruggen, Hogeschool van Amsterdam*

Compared to other business and management fields, e-learning in the field of occupational therapy is still in the early phases of adoption. ENOTHE made already steps towards this development ([http://www.enothe.hva.nl/itm/e-learning.htm](http://www.enothe.hva.nl/itm/e-learning.htm)).

This workshop invited participants to explore and to reflect on e-learning as a mechanism for promoting communities of practice and for continued development and internationalization. The basis of the workshop was the learning from the ERASMUS curriculum development “Euro-education Employability for all: EEE4all”: a two year project between five European partners which has led to the development of four joint international modules focusing on employability.

Participants had the opportunity to experience and reflect on some of the media we used within the eight week e-learning component of the module including the use of animation and digital storytelling, to learn of the challenges we faced and to play a role in creative problem solving to consider ways of building on this work and taking these ideas forward.

**Appendix presentation 5.4**
5.5 Workshop 5 – ELSITO (Empowering Learning for Social Inclusion through Occupation): Creating narratives to facilitate recovery and social inclusion

Chris van der Molen (GGZ inGeest partner VUmc, Amsterdam, The Netherlands), Luc Vercriuysse (Hogeschool-Universiteit Brussel, Belgium)

-Presenters will include two of the members of the ELSITO partnership

ELSITO is a learning partnership involving the following institutions and organizations:

Hellenic Association of Occupational Therapists, Greece; GGZ in Geest partner VUmc, The Netherlands; Hogeschool-Universiteit Brussel, Belgium

Collaborating partners: (non official): Rusenski universitet “Angel Kanchev”, Ruse, Bulgaria; Fundacio Universitaria Balmes, Vic, Spain; University of Teesside, UK; ENOTHE

The group has received a two year funding as a Grundtvig Learning Partnership under the Life Long Learning Programme of the EU from August 2009. Vulnerable social groups face much more exclusion, have less access to resources and struggle often with lack of money. The aim of the partnership is to exchange good practice in projects working towards social inclusion and to develop community based projects in partnership with persons from vulnerable social groups (persons experiencing mental health problems, immigrants and refugees), empowering their active inclusion and recovery of citizenship through economic, social, cultural and civic occupations, based on their learning and on the education of society. Service users, occupational therapist educators, practitioners (with different professional backgrounds including occupational therapists) and students, are, on an equal base, actively involved in the partnership, both through their own local projects and through the exchange visits between the partners, in order to more fully understand the learning processes that take place (for all) in developing social inclusion and community projects.

The partnership also aims to build up a network across Europe of similar projects in order to exchange experiences and disseminate good practice to all stakeholders and to further the development of community based projects that promote social inclusion for all vulnerable groups through occupation. It is expected that this can be the base for a research network on this important theme.

After a short presentation of the different local projects in Greece, Belgium and the Netherlands the workshop reflected on the personal narratives and diverse good practices for social inclusion and recovery.

In particular the workshop focused on the following questions:

How can we generate narratives, stories for recovery and social inclusion?

How can we facilitate students to do that with service users?

How can we use ourselves as a person in our professional relationships in story making for recovery and social inclusion?

With the participants, the workshop explored these questions, particularly in relation to the preparation of students for practice in and with communities and make an inventory of possible methods to do that.
5.6 Workshop 6 – Overarching teaching and practice: How to strengthen the role of Occupational Therapy in the academic and clinical system - a joint presentation from the Karolinska Institutet and the Karolinska University Hospital

Monika Samuelsson, Karolinska University Hospital (KUS), Anders Kottorp, Karolinska Institutet (KI), Annika Öhman, Karolinska Institutet, KUS and KI, Susanne Guidetti, KUS and KI

By Anders Kottorp, Annika Öhman Karolinska Institutet, Stockholm.

The presentation focused on describing the process of a joint effort of simultaneously developing the quality of occupational therapy in education, research and clinical praxis.

From 2004, the Occupational Therapy department at the Karolinska University Hospital, Stockholm, Sweden, and the division of Occupational Therapy at the Karolinska Institutet, Stockholm., Sweden has developed an intense collaboration around occupational therapy in education, research, and clinical practice. Today, in 2010, several achievements have been made in order to position occupational therapy as an important subject in both organisations. The presentation highlighted factors of importance to promote collaboration of occupational therapy between academic and clinic in order to:

- Enhance the level of evidence-based practice, education and research
- Integrate research and specialist clinical knowledge positions within the professional career development for OT
- Facilitate joint positions for clinicians/senior lecturers/researchers

5.6.1 Short notes from the Workshop “Overarching teaching and practice: how to strengthen the role of Occupational Therapy in the academic and clinical system- a joint presentation from the Karolinska Institutet and the Karolinska University Hospital “ ENOTHE Stockholm 15 October 2010

by Anders Kottorp, Monika Samuelsson, Susanne Guidetti, Annika Öhman and Anna Johansson.

Group 1 Opportunities and challenges of overarching the academic and clinical system:
Focusing on good examples and future strategies.

For example: Building networks/alliances, leadership and organization, and creating time and space for development.

- Practical focus for the students gives ideas for development and research questions- the bachelor thesis.
• Journal clubs for faculty, clinicians and student to promote an evidence-based approach in clinical settings.

• Project dating.

• Study day- mini congress/seminary invites the clinicians to the faculty.

• Facilitate education of OT in primary care in research knowledge, skills leads to inspiration to shortcuts to bachelors’ projects.

• Clinicians could apply for funding for smaller projects at the University.

• Philosophical discussions with the students, diverted “reality” and university. (Students comments)

2. Facilitating development of occupational therapy in education and clinic

Focusing on contextual factors of importance. Why are the factors important? How can the factors be facilitated?

• Resources – money, time, logistics and space to do it.

• Shared ideas and beliefs important to power OT development.

• Clinician as an educator and vice versa.

• Role models in education – OT’s as teachers, supervisors and researchers.

• The OT associations have a lot of responsibility of development.

• OT’s in leading positions will facilitate.

• International co-operations and meeting, as ENOTHE .

• All aspects of evidence based practice.

• Educate fieldwork educators in teaching.

• Education for clinicians.

• Active networks.

• Learning from each other. Updates information to students.

• A shared website – clinics -> university, student assignments.

• Skype as a resource, for example for countries without OT.
3. Implement research results in clinical practice and teaching.

How to implement research results in clinical practice and teaching – and how to implement clinical practice and teaching in research? Focusing on “good examples” from own practice where you implemented research results/evidence.

- Use students for collecting data.
- Students/teachers/clinicians presentations together.
- Different way of communication, creative ways to share.
- Journal clubs- student meet clients problem and look at that with evidence making a short user friendly summery and coming back and present for the clinic and the client.
- Clinicians coming to the University with a problem to the student, the student problem solving and coming back to the clinic and present.
- 3 years OT student meet designer from another faculty during time in one semester making a assistive devices and presented at 1 day for open public.
- School PhD lectures telling about their references using the students for research- group BSc trigger research.
- Guest teachers in Sweden, Denmark and Netherlands.
- Pay salary. Didactical clinical competence.
- Using research
- Expectations of students are different- tell them beforehand research is a part of the education.
- Also stress more not only research- follow up implement disseminating.
- Student should involve.
- Encourage poster, article presentations.
- More critical board for BSc thesis.

Appendix presentation 5.6

5.7 Workshop 7 - Occupational Therapy in a Prison Setting

Sarah Quinn & Katie Cremin (Dublin University at Trinity College Discipline of Occupational Therapy, Trinity Centre for Health Sciences, St. James’ Hosp Campus, Dublin)

Occupational therapy is not a service traditionally offered in Irish prisons. However, in 2008, to meet a need within the (women’s) prison service and the university, a collaborative project was established. Employing the teaching methodology of service learning, occupational therapy students and lecturers delivered, and
evaluated, a nine week self-advocacy programme. The relationship between the two institutions has grown and programmes on stress management, drama, and independent living skills have since been delivered.

It is typically thought that prisons are occupational deprived environments (Whiteford, 1997) and prisoners vulnerable to multiple types of social exclusion, including pre-existing deprivation, stigma, poor future prospects and administrative invisibility (Murray, 2007). Women in prison often display dependence on structure, interpersonal distrust, alienation and stress related reactions; it is recommended that programmes place women within the context of their relationships and environment (Ferszt et al, 2009).

The central objective of this project is to develop, in the female prisoners, an ability to manage relationships and their occupational lifestyle both in the prison and on release. Given the setting of the project, there are many factors at the level of the person and the environment that impact greatly on the women’s occupational engagement with the programmes. These need to be reflected upon and negotiated for the success of the project.

Having presented the background to the project, and an account of person and environment related influencing factors (using case studies); this workshop explored, with participants, what occupational therapists can uniquely offer within this deprived setting.

Appendix presentation 5.7

5.8 Workshop 1 – Community University Partnerships in Occupational Therapy in Europe

Margaret Mc Grath (National University of Ireland, Galway Ireland), Saskia Hofstede Wessels ( Hogeschool van Amsterdam, The Netherlands), Ines Viana Moldes ( Universidade da Coruna, Spain), Karin Lilienberg (Tallin Healthcare College, Estonia), Hetty Fransen (Higher School for Health Sciences and Health Technics, University of Tunis -El Manar, Tunis,)

A key challenge for Occupational Therapy education in Europe from 2010 and beyond is the need to develop educational approaches which will ensure that occupational therapy addresses social needs and sustains its relevance to the social context (TUINING in Occupational Therapy Project Group 2008). New approaches are needed in occupational therapy education to ensure that graduates have the necessary skills to meet the requirements of the European Social Agenda, the EU Disability Action Plan and the Council of Europe Action Plan. The results of the TUNING in Occupational Therapy Project Group suggest that competencies in the areas of community based rehabilitation and community based development are essential if occupational therapy is to continue to contribute to the achievement of economic, social and environmental objectives at a European level (TUNINING in Occupational Therapy Project Group 2008).

Community – university partnerships have emerged as one method of addressing these challenges in occupational therapy education. Community – university partnerships refer to collaborations between
occupational therapy departments and local or international communities. Despite their increasing popularity in occupational therapy education to date no systematic approach has been developed do describe and analyse these partnerships and so sharing of information/experiences between occupational therapy educators remains problematic.

This workshop provided participants with the opportunity to learn about a framework for describing community university partnerships in occupational therapy. Participants will be facilitated to discuss what is meant by community – university partnerships, to hear from the experience of occupational therapy educators from four different European countries and to apply the framework to their own situation.

At the end of the workshop participants could

- Understand the term community – university partnerships
- Recognise the cultural differences between community university partnerships within European curricula
- Understand the rationale for introducing a common framework to describe community- university partnerships in occupational therapy
- Apply the framework to their own context

The project group integrated occupational therapy educators from across Europe to examine the use of community university partnerships in occupational therapy education. The work of the group has led to the development of a framework to documentation of current practice in Europe and the generation of a shared understanding of what is meant by community university partnerships.

Appendix presentation 5.8

5.9 Workshop 2 – The art of shopping. Doing, being, belonging and social inclusion

Ton Satink, Hogeschool van Nijmegen

The themes of the OT-curriculum of the HAN University are entrepreneurship, community based OT, and participation and transformation. These themes have converged in a module called ‘Entrepreneurship in the community’. In a pilot project, students had the task to explore the possibilities and later on to organize an activity that leads to participation and social participation of people in the community. After a short exploration the activity of shopping has been chosen for this task.

The workshop started with an introduction. It showed how the activity of shopping is much more than only ‘buying things’. The art of shopping is also ‘being and belonging in a group’ and it can lead to ‘social inclusion on a small scale’. The organization of the activity (collaboration with other professionals, students, lecturers), as well as experiences of ‘the shopping people’ and students were presented and discussed.
Based on this activities and pitfalls in the organization the workshop ended with some recommendations for similar study tasks in our future curriculum.

After the introduction of the workshop, the participants of the workshop were invited to discuss which other activities could lead to social inclusion and what is needed for education to support these kinds of activities. Attention was also paid to the question: what is OT in community based activities?

Appendix presentation 5.9

5.10 Workshop 6 – How to enable social inclusion in adolescent persons with functional disabilities through computer adaptations

Helena Hemmingsson (reg. OT, PhD, Professor of Occupational Therapy, Department of Societal and Welfare studies, Faculty of Science, Linköping University),

Helene Lidström (reg. OT, MSc, PhD candidate, Division of Occupational Therapy, Department of Neurobiology, Care Sciences and Society, Karolinska Institutet, Stockholm, Sweden and Folke Bernadotte Regional Habilitation Centre, Uppsala University Hospital, Uppsala)

ICT- enabler to social participation in school and outside school?

Overview:

Our contribution to the workshop explored and discussed the links between Information and Communication Technology (ICT) and students with physical disabilities social participation in school and outside school activities. It will be based on a doctoral research project at Karolinska Institutet, Sweden. The activity patterns of children and youths in school and outside school have changed in recent years. One factor behind this change is the increased use of ICT (Dix, 2005) in activities at home and in education (Kautiainen, Koivusilta, Lintonen, Virtanen, & Rimpelä, 2005; Sølvberg, 2002). The increased use of ICT might be a particularly promising development area for students with physical disabilities, as ICT have documented potential to compensate for impaired function and is highly beneficial in the areas of communication, and information and knowledge gathering (European Agency, 2006). From the perspective of psychosocial health, it is important to establish how it is possible to improve the opportunities of children and youths with disabilities to enable them to engage in social activities and improve peer interaction. Current findings indicate that computer and Internet activities, such as on-line communication and computer games, could increase the interaction of children with disabilities with their peers in social activities outside school. ICT activities have also the potential to act as a substitute for activities that children and youths with disabilities are unable to do (because of physical or other limitations), but which could still bring meaning and enjoyment to the children (Lidström, Ahlsten, & Hemmingsson, accepted).

Report:
The main areas of interest to discuss but are not limited to:

-How can we in occupational therapy interventions meet our clients’ need of ICT, in terms of social participation, in schools, at leisure time and in work?

-Many everyday technology products were based on universal design principles, such as mobile phones, computers, and can fit the widest possible range of users. Because of the advanced technology, required a
lot of knowledge about the product, the client and the context in which the device is used. What skills have students in occupational therapy program today on the role of ICT to improve children’s, youths and adults to social inclusion? Is it enough?

-How can you distinguish between ICT as an educational tool and assistive technology device? Discuss similarities and differences?

Appendix presentation 5.10

STUDENTS PARALLEL SESSIONS

6.0 Session 1 (Room 402)

6.1 About the needs of disadvantaged people

Céline Beddeleem, Naaike Delcour, Sharon Messiaen, HOWEST Kortrijk, Belgium

This project is about the needs of disadvantaged people.

We wanted to start this project to have a better picture of the daily interpretation of these persons and what they still want to achieve in their lives.

By offering meaningful daytime activities we create a role in society, so they will have a bigger image. Even people who are looking for work are a target.

With the guidance of those people we fight poverty indirectly. The guidance may include lessons of computer education and there by create employment.

Appendix presentation 6.1

6.2 Educational Inclusion: The perspective of Somali young people in Cardiff.

Sara Redclift, Jessica Mullins, Cardiff University, Wales

Cardiff is home to the largest British-born Somali population in the UK (Crawley 2006). Somali seaman first migrated to Wales in the 1880’s and found work on the docks (Crawley 2006). Over the last twenty years there has been an influx of Somali refugees due to the outbreak of civil war in Somalia (BBC news 2004). Unlike the seaman that first made their way to this country 95% of the Somali community in Wales suffer from unemployment (Select Committee on Welsh Affairs 2001), many of them received little education in Somalia (The Guardian News 2006) and this is one of the most economically deprived and vulnerable groups in the UK (Hassan et al 2008). “Somali young people face particular obstacles in terms of their
education, and these are centred around teachers attitudes, peer behaviour, and lack of parental understanding to be able to support their children’s education.” (Hassan et al 2008, p4)

As a group of Occupational Therapy students we intend to work in partnership with a community organisation called the Somali Integration Society (SIS) to create a short video documenting the obstacles to education and employment for young Somali people living in Cardiff aged 15 to 25; and what they feel could be done differently. We aim to create this video clip in collaboration with the SIS and Somali young people that we meet through the organisation that could be distributed locally by the SIS in order to raise social awareness.

**Appendix presentation 6.2**

**6.3 How homeless people’s situation influences their capacity in performing activities and which actions to be undertaken from an occupational therapy point of view.**

*Leyla Linoubli and Emma Cederlund (Faculty of Health Sciences, Occupational Therapy Program, Linköping University, Sweden)*

We wanted to investigate how the present situation is looking like for homeless people in Norrköping today, and also how their situation influence their capacity in performing activities, and what actions that can be undertaken to address their needs from an occupational therapy perspective.

The total amount of homeless people in Norrköping was in 2009, 347 people, and among these were 8 people openly homeless.

To be openly homeless means that one does not have a roof over his or her head. From an occupational therapeutic perspective it is vital also for homeless people to experience an *encouraging* and supportive environment where the individual can develop healthy habits, routines, and roles.

People in the community of Norrköping have been interviewed by phone or e-mail. We have also made educational visits, read occupational therapeutic literature, and different reports from Swedish authorities.

From this current study we so far have seen that the community of Norrköping offers homeless people assistance in speaking of different kinds of community housing and health- and rehabilitation clinics. Although these interventions exist we believe the demands on the individual are very high.

The occupational therapist can, by offering the clients help to develop vital skills to fulfill their roles, and by creating an encouraging environment which also supports the development of new skills, help the client to transfer the skills into habits and also use these habits in other life- situations. Accordingly, we identified a set of actions that can be under taken by the occupational therapist.

**Appendix presentation 6.3**
6.4 Child camp with an activity on sensibility on poverty

Jasmien Stevens, Kimberly Vanmarcke, Mieke Vandekerckhove (Hogeschool West-Vlaanderen Departement Renaat de Rudderlaan, Belgium)

In cooperation with Centrum Overleie at Kortrijk we have worked out a project about deprived children and inclusion. Our part in this project included organising a yearly child camp where every child out of every part of the population would come in contact with each other. The child camp is cooperation between youth service, Grabbelpas and the entire neighbourhood functioning. There are four neighbourhood functioning who can join, so we have a mixed population of deprived children and children who don’t come in contact with any form of poverty. There will be several prices used; 20 € for Grabbelpas, 10 € for registrations through neighbourhood functionings and team youth. The duration of the camp would be four days, sleeping accommodation inclusive, and will be held in the last week of August from Monday till Thursday. There will not be any actions undertaken to lower de prices because it’s not their intention to organise the camp for free. All the activities that will take place during the camp are based on a central theme. The theme we will choose has to be something that has a connection with poverty and inclusion, for example a character from a fairytale. In June we will meet the other monitors to discuss about the theme and the activities. We, as students of occupational therapy, are responsible for the organisation of an activity that will make the children sensible on poverty and some important values in life, such as: tolerance, not bullying each other, helpfulness, honesty and justice.

Appendix presentation 6.4

6.5 Occupation therapy and poverty in the work (re)integration

Mieke Lemmens and Catherine Eyben (PHL, Hasselt, Belgium)

More than 15% of the Belgian population will sooner or later face poverty. These people are extra vulnerable: they have a lower education, come from a broken family, get ill or invalid, are unemployed... and end up in poverty. We already know that there are multiple benefits and subsistence but our welfare system operates far from perfect. Poverty in our society is a consistency of many factors, including difficulties in education, poor labour employment opportunities, low income, unhealthy housing, and difficult home situations. These related problems reinforce each other and, in turn, create a cycle of poverty. Therefore we set out to study the different ways of reintegrating people in poverty, more specifically work reintegration. In this way they can improve their financial situation, increase the opportunities for social contacts and in this way they have more self-confidence and see the meaning of their life. And thus, escaping poverty, both in social and financial way.

Appendix presentation 6.5
6.6 The Irish Travelling Community: An investigation into their struggle to combat poverty and social exclusion in daily life.

*Suzanne Leclair, Ciara FitzGerald, University college Cork, Ireland*

The Travelling community is Ireland’s only significant indigenous, ethnic minority. This particular Irish community is one that experiences deprivation and segregation from Irish society. This issue correlates with ‘European Year for Combating Poverty and Social Exclusion’ (2010). Two Occupational Therapy students from the Department of Occupational Science and Occupational Therapy, University College Cork (UCC), Ireland, have undertaken research into the health status of adult members of the Travelling Community. The typical life expectancy of a female Traveller is eleven years less than the general Irish population and that of a male Traveller is fifteen years (“All Ireland Traveller Health Study”, 2010). This is a statistic for which there is no current explanation.

This project will investigate the occupational therapy services currently available to the Travelling Community and how misunderstood traveller lifestyle/traditions and attitudinal barriers affect access to these services. Occupational therapy services which could benefit this community will be addressed. Our information has been compiled through research, interviews and documentation. As similar communities exist throughout Europe, it is hoped that by presenting in this ENOTHE forum discussion will be provoked, ideas will be created, and knowledge shared between fellow European students.

*Appendix presentation 6.6*

7.0 Session 2 (Room 404)

7.1 From distribution to contribution

*Liesbeth van Hoffelen, Hanna Bortier, Silke Jacobs, Iris Keulemans, Artesis Hogeschool Antwerpen, Belgium*

Daklozenhulp Antwerpen is a local association in the city of Antwerp, Belgium. Set up in 2001, this association aims to provide help in an accessible and concrete way to inhabitants of Antwerp and the surrounding area who live on the poverty line for whatever reason. As a result, these people sometimes have insufficient resources to buy food. A group of volunteers selected from the target are active to realize the food distribution. Starting from the occupational therapist perspective, we will develop a project in close cooperation with the president of the association, Mister Vaes, director of the Antwerp Business Center. Our project should allow to support the group of volunteers to define their own needs and objectives and to take actions in order to meet this needs. We aimed to enlarge their self-esteem and create a social importance. Our goal was to emphasize the participation of the group itself in defining and achieving their needs. (Community based)
Our project involved:

- Research in order to define the needs of the group:
  We set forth to meet up the people for a personal conversation in order to define what they consider to be a lack in their life. We will also make an inventory of the group competences.

- Finding partners in order to achieve the needs of the group:
  We acted out as spokesperson between the target group and the partners. These partners were informed of our intention and we clarified the profile of the volunteers they are looking for.

- Starting up new initiatives in agreement with other partners

- Identifying outcomes.

**Appendix presentation 7.1**

7.2 Arcade 84

_Hannah Worrod, Laetitia Monney, Luisa Somazzi, Roberta Sacchetti (EESP – Lausanne, Switzerland)_

Arcade 84 is an existent association in Switzerland since 1986. It gives the chance to person with psychic troubles to be reinserted in social and professional life. This association takes place in the centre of Geneva where reinsertion is possible through artisanal an informatic workshop. A restaurant is also open to public where patients work. The support is not exclusively taken by the occupational therapists but also by a nurse, animator, and social workers. If there is some spécials desires, the occupational therapist can invited specialists like photographs or sculptor to help the patients in their work.

**Appendix presentation 7.2**

7.3 Relearning the writing and reading skills to disadvantaged people

_Flore Moerman, Nathalie Dhuyvette, Ruth Knockaert (Howest department Hiepso, Belgium)_

We worked on a project about relearning the writing and reading skills to disadvantaged people. In this way they get more employment opportunities and leisure activities. This project was suggested by the WVA, a workgroup of shaping and action.
First, we investigated the demands of the clients, to make sure that it will be a useful project. (f. ex.: is this a wanted project, what do they want to learn about reading and writing, what would they want to achieve etc.)

We got the group together once in a week. We worked with an increasing level of difficulty. The first week we worked with the alphabet, the second with words and the third with sentences. The fourth week we worked around the newspaper and other daily papers and the last week we made it a little bit funnier by working with dialogues, role-playing, telling jokes, proverbs... We made sure that the group got activities that are useful and fun to do.

Appendix presentation 7.3

7.4 Daily Life in WEIBERWIRTSCHAFT

Irene Fritz, Martina Groissberger, Martina Hinterleitner, Sonja Hofer, Martina Jagersberger, Leonie Köppl, Anna Lahofer, Lisa Mezger, Katharina Moser, Katharina Ottinger, Barbara Scherabon- Csizy (University of Applied Science in Wr. Neustadt, Austria)

The project „Daily Life in WEIBERWIRTSCHAFT“ aimed to find out more about the experiences, needs, hopes and history of socially “disadvantaged” women and their children living in an institution called WEIBERWIRTSCHAFT in Wiener Neustadt.

So far there has already been a former project with other OT students involving garden activities and there is still a big wish for collaboration. This brought us to the idea to gain more knowledge about the circumstances of the women.

An objective was to identify possible future projects on basis of the gained knowledge.

We made interviews with some of the women who wish to participate on a voluntary basis. A further goal was to find out necessary information to be able to plan an activity together with the women and their children as a social event. The findings and our reflections of this experience were presented at our university of Applied Science and in Stockholm at the ENOTHE conference.

Appendix presentation 7.4

7.5 Starting a durable cooking activity

Lisa Houzet, Ine Moentjens, Lore Vanstaen (Howest department Hiepso, Belgium)

We wanted to start a sustainable cooking activity with desserts. The purpose of the activity was to achieve social inclusion taking into account poverty. The 26th of June we promoted our activity with a creative and original stand at the area party the Venning was organizing. We did this by making homemade tastings and
handing out flyers so people can subscribe for the first activity on July 8th. After the area party people can also subscribe with Annelies until 7th July.

Next to that, we also handed out flyers in the district and surroundings, as a reminder of the cooking activity and as extra promotion. The 8th of July (the day of the first cooking activity) we made milkshake and fruit salad. Depending on how the event goes, people can choose from the cooking book we created ourselves. One of our main purposes was to reach as many people as possible. We had a good attendance and social contacts were stimulated.

We’re hoping for more success so the activity can continue on a monthly basis.

**Appendix presentation 7.5**

**8.0 Session 3 (Room 101)**

**8.1 ‘De Katrol / The Pulley’**

*Jonas De Maet, Joke De Vos, Ellen Hollemaert, Isabelle Straetmans, Ann Van de Velde, Sarah Verplaetse (University College Ghent, Belgium)*

‘De Katrol’- is an organization whose stated aims are directed to underprivileged families. It’s a strictly preventative development-project which offers study- and upbringing assistance provided by students. The reason for starting such a project lies in every parent’s wish: “a positive future for their child”. Its three main goals are: to equip the underprivileged, to empower parents, and to provide future community workers with skills when helping the underprivileged. In this presentation we will consider: ‘How we can include Occupational Therapy in a project such as ‘De Katrol’”?

**Appendix presentation 8.1**

**8.2 Research of poverty in Courtrai and publication of a flyer with energy saving tips**

*Sharon Braem, Maayke Lagae, Ine Oosterlinck (HOWEST KOKTRIJK, Belgium)*

Poverty is a social problem that, due to the current financial crisis, will be demanding more attention in the future.

With our project we want to map the poverty in Courtrai, a town in Belgium. Therefore we refer to the poverty report of the Social House (het sociaal huis), dated May 2008.

Poverty can be caused by all sorts of origins, for example: generation poverty (poverty that goes from one generation to another), divorce, health issues...
The information that we gathered was incorporated in statistically, so that all those present during the presentation could understand the context and the intention of our study in a better way.

There are a number of organizations where people who are coping with poverty fall back on. We discussed the most relevant topics briefly. During the preparation and making of this assignment, it became clear to us that it was not going to be an easy task. There is still a great taboo about the subject poverty and that makes it hard to reach our target group and to offer them help.

Unfortunately we cannot/may not take initiatives of our own because of the vulnerability of the matter. Therefore in agreement with the Social House of Kortrijk we decided to make a flyer/poster with energy saving tips. This way we were given the chance to contact these people struggling with poverty. This is more likely to be a success cause of the safe approach. This seemed to us the ideal way to encourage these people and to try solving some of their problems; we hoped this was a very good start.

Appendix presentation 8.2

8.3 Promote Healthy Eating Amongst Young Mothers within the Valleys of South Wales

Hayley Jones, Charlotte Owen, Julia Lloyd, Kristen Osmundsen, Melissa Williams, Rachael Stockes-Richardson, Miriam Page and Lavonah Ditlhako (Cardiff University)

Merthyr Tydfil is an area of Wales that has been identified as one of the most deprived communities in Wales. Merthyr Tydfil is scared by chronic unemployment, precipitated by the collapse of industry, during the 1980’s. There is a high level of occupational deprivation which is presently entering the third generation. The aim of our project is to; engage young mothers and children from Merthyr Tydfil in pre-planned occupational activities that promote the concept of a ‘healthy lifestyle’.

We planned to work in collaboration with 3G. 3G is an organisation that was established to help combat poverty and social exclusion in this area of Wales. 3G provides an array of learning opportunities for young adults, which enables them to attend training courses, explore career options and possible future employment opportunities.

Our project was embedded in an existing part of the 3G organisation called ‘Life Support’. We intended to plan and carry out 6 activity sessions over 6 weeks, during our summer recess. It was our intention, to create opportunities where young mothers can participate in “healthy eating” classes that will assist people in purchasing cheap, healthy foods and developing skills of how to cook them.

As OT students we are aware of the importance of maximising learning opportunities for all of those involved. We also recognise the need to remain true to the philosophy of occupational therapy. Our sessions were client led and centred on their unique and individual learning needs.
Appendix presentation 8.3

8.4 Changing Perspectives

Sarina Oepping, Maria Fendel, Dorothea Bockhold, Magdalena Tobergte, Rahel Kruse, Lea Pieck (ETOS, Germany)

The main aim of the project is to draw attention to socially disadvantaged homeless persons and to get a wider understanding for their mentality.

Through the project we wanted to see their ways of living by getting in contact with approximately five homeless persons, after that gave each of them a single-use-camera so that they could take photographs of their life perspectives. We arranged a meeting where we came together again to develop the photos and where another date was chosen to create the following exhibition. On the one hand this exhibition showed the view of the homeless by using their photos and is on the other hand completed through general facts, statistics and interviews collected. For this reason we developed certain questionnaires. All this is meant to happen in public to reach as many people as possible. More over we designed handouts to get the attention.

Appendix presentation 8.4

8.5 Daytime from People in A Closed Asylum Center

Caitlyn Decramer, Elien Derucyk, Stefanie Derucyk, Lore Koelman, Leen Swaels (KHBO, Belgium)

Our goal for this annual meeting was to have a clearer image of the daytime from people who stay in a closed asylum center. Are these people able to act on the 3 occupational areas? We would contact an asylum center in our surroundings and have contact with the people who stay there. These people would have a different background and culture and there would also be families with children. We also wanted to know if they came here because they lived in poverty in their country or because of political reasons or something else. Now we have no idea how they fill their days; do they work over there and are they being paid, are they doing household chores, are the children being taught, are they motivated if they have to work of do a chore? Do they understand the other families and the people how work there?

In this research we also wanted to emphasize the social integration and occupational justice. Do these people have a chance to have contact with other people (from the center or outside)? Is there in the center a possibility to follow lessons to learn the language from the country they stay in? We also wanted to take a look at the facilities in the center; do they offer the people some kind of activities?

A last item we wanted to know was do these people have any money to buy for example cigarettes, beauty products.
We asked some people from the center to fill in a diary with the activities they do during the day. With this method we had an image of their daytime. We did this in combination with a visual analog scale so we could check their motivation to do those activities and if they find this important to do.

We made suggestions to fill in the daytime of the people in the closed center.

Appendix presentation 8.5

9.0 Session 4 (Room 105)

9.1 The financial problems during the transition at the retirement for people with disabilities in Switzerland

Pauline Merminod, Juliane Brêchet, Raphaëlle Donnet, Damiano Salvi, David Krebs (EESP, Switzerland)

In Switzerland, people with disabilities receive a pension from the « Assurance invalidité (AI) » (Disability Insurance) according to their degree of incapacity in earning money. This insurance, like many others, guarantees to the person with disabilities correct livelihoods. First of all, the « AI » aims the reintegration of the people with disabilities so that they can provide for their needs entirely or partially by their own means and, in this way, be the most self-sufficient possible. The « AI » finances, amongst other things, some environmental adjustments and different technical aids. In Switzerland, the people are entitled to this insurance up to the age of retirement, that is to say 65 years for men and 63 years for women.

In the transition to retirement, « assurance vieillesse et survivant (AVS) » (old age insurance) takes over. This insurance offers a catalogue of services more restricted than that of the AI. Then, the people who only live by the AVS pension find themselves in certain precariousness. Because it represents little money compared to the cost of living in Switzerland. This situation is especially problematic among people with disabilities, especially for those who need assistive devices. That’s why the work of the occupational therapist is particularly important in this situation. He must anticipate the needs of the person and he has to find other alternatives. Therefore, it is important to make the therapists aware of this problematic and that they know the social insurance system in Switzerland.

Appendix presentation 9.1

9.2 The « Quartiers Solidaires », a community outreach in favour of the elderly

Caroline Burnand, Cyrille Caille, Anne Deblock-Belamy, Sandrine Gindre, Camille Vuagniaux (EESP, Switzerland)

The « Quartiers Solidaires » program (QS) focuses on elderly people living at home and who are at risk of isolation. The aim of our presentation was to introduce this innovative program in the French part of
Switzerland to the audience. Currently, a couple of these areas are already operational and many others are being created. As OT-students, our main interest lies in the role OT can play in such a concept, and how it can contribute to the promotion of their profession.

**Appendix presentation 9.2**

**9.3 An exploration into the current inclusion opportunities for adults with Autism Spectrum Disorder in Scotland from an occupational therapy perspective**

*Ali Davison, Ali McIntyre, Aileen Duff (Queen Margaret University, Edinburgh)*

Consideration of current inclusion opportunities in Scotland for adults with autism spectrum is particularly relevant given the political proposal for an autism strategy for Scotland. The findings of a recent report of the National Autism Society “Don’t write me off” concluded that a large percentage of adults with autism often do not live independently, fail to secure employment, and experience mental health issues.

Given that ‘Poverty’ can be defined as a lack of experiences or opportunities, and one of the general principles of the UN Convention on the Rights of Persons with Disabilities was ‘full and effective participation and inclusion in society’, the concept of social inclusion seems particularly pertinent to this client group.

The presentation firstly explored the concept of social inclusion, considering European, UK government and Scottish Government Strategy proposed and existing autism strategies. The perspective of the National Autistic Society and Service Users was discussed and consideration given to the role of occupational therapy and occupational Science with this client group was discussed.

**Appendix presentation 9.3**

**9.4 Investing emotionally in one’s home: a way of avoiding social exclusion and precariousness of psychotic people**

*Lucie Delaune, Denielle Chloé, Emilie Ducasse, Bernadette Jaeger, Elisabeth Joseph, Alexandra Le Loarer, Celine Pennequin (Department of Occupational Therapy of Créteil, FRANCE)*

Having noticed the social difficulties of psychotic people, and the restless wandering they are confronted to, we would like to work on this subject and present our work at the Enothe congress.

So, how can we, Occupational Therapists encourage psychotic people to stay in society and thereby reduce the phenomenon of pathological wandering?

In order to answer this question, we would like to set up a collective workshop of furniture restoration.
In order to fight against the large amount of people living (in the streets or) in insanitary accommodation, we would like to put forward a group of occupational therapy working on furniture restoration. The furniture in question would be restored in workshops, and then kept by the members of the group, allowing them to furnish their housing at low expense. By the same token, one could expect the patient to invest emotionally in his work, and the chances are that he would be less inclined to destroy it during acute decomposition.

Moreover, the nature of these collective workshops in them is a way of binding with other people (patients and therapists) and avoiding against social exclusion.

Appendix presentation 9.4

9.5 Poor? – I don’t want to be poor! How do children view poverty?

Natalie Kremer, Maike Keßel, Jenny Nutsch, Annika Uhrig, Hogeschool Zuyd, Heerlen, Netherland

We planned to go to primary school(s) to interview children, parents and teachers in Germany.

Our goal was to find out what influence poverty has on children in the age of 6 to 10 years. We wanted to know how children define poverty, how they experience their own poverty and to what extent children recognize it at other children related to participation. It would be interesting to find out whether the opinions from the children differ between different social levels. Furthermore we wanted to find out if the poverty has influence on the participation in daily life. From the teacher we wanted to get information about which children are excluded from the class and if there is a relation between disadvantage and exclusion.

Dependant on the results of the interviews we may develop a program to combat or prevent the negative influences of poverty on the participation on children. For example we are thinking about a program in which children learn not to exclude children who are financial disadvantaged or how poorer children can cope with the lack of money. But what the program concretely will contain will be only clear after we have found out the main problems and needs of the disadvantaged children in the interviews.

Appendix presentation 9.5

9.6 OT Intervention in Foster Families (OTIFF)

Alba Pérez, Paula Gómez, Arlet López, Cris Iglesias, Pau Escolar, Maria Beneyto, Cristina López, Laia Arias, Marta Téllez and Alba Soler (Escola Universitaria Creu Roja, Spain)

Occupational therapists have a basic role in the field of children, mainly when there is an occupational imbalance.
Since 1985, the Instituto Catalán de Acogimiento i Adopción (Fosterage Catalan Institute) with several associations has developed in Gerona area a Fosterage Programme. Nowadays, 45 families from different towns are involved in this Project. The people who can participate in this project are, on the one hand, catalan children or teenagers at risk of social exclusion and emotional poverty, and in the other hand, families that fulfil the requirements of the program. The project is being carried out by a multidisciplinary team, but there is not an OT as part of it.

The Association has requested to several students from the Escuela Universitaria Creu Roja to develop an OT project. The aim of this project was to show the role of the OT as part of the multidisciplinary team of the Gerona Province a Fosterage Programme. Therefore, the goal of this work was to develop the basis of this project.

Appendix presentation 9.6

10.0 Session 5 (Room 111)

10.1 “Feel It”

Cornelia Höring Doris Baumgartner, Natascha Bujnow, Johanna Gaigg, Sonja Hammerschmied, Manuela Rampetsreiter, Alexandra Stix, Bettina Nevosad (FH Campus Wien, Austria)

The aim of our project was to sensitize kids to visually handicapped people. This way prejudices should be removed and a little step against social exclusion should be taken.

On the one hand it was important to us to get information about blindness and social exclusion. On the other hand we intended to provide a framework, in which kids can gain experiences about how it can feel being blind and which impact blindness can have on acting in life.

Thus we contacted an Organization for visually handicapped people, called „Hilfsgemeinschaft“ as well as an after-school care club. Both agreed to take part in the project.

In order to get information we did research on literature and we interviewed a visually handicapped member of the organization about blindness and his experiences on social exclusion.

Furthermore we created a set-up for eight kids (aged 7 to 10 years) of the after-school care club to give them the possibility to gain experience without seeing. On two afternoons we played games, in which different senses were addressed and we did different activities of daily living, like preparing lunch, eating, getting on shoes and a jacket etc... We also talked about experiences made with blind people and attitudes towards blindness.

On a third day we visited the organization for visually handicapped people. There the kids got to know blind people and spent an exciting afternoon together with them. They became acquainted with special aids and with Braille, were able to ask all kinds of questions, tried to use a blind man’s stick and shaped salt paste without seeing.
Step by step the kids gained experiences and a little insight into how life can be without seeing.

Appendix presentation 10.1

10.2 Living with debts! Interview with persons concerned

Alexandra Kaineder, Angela Seyss-Inquart, Miriam Thauerböck, Stefan Kollmann (Akadamie für Ergotherapie, LNK Wagner Jauregg Linz, Austria)

The European Union has joined forces with its Member States to make 2010 the European Year for Combating Poverty and Social Exclusion, to raise public awareness about these issues and renew the political commitment to combat them. The link between poverty and debts overload is faced clearly in scientific studies and statistics. There are about 300 000 households in Austria which are in debts. Living with debts has different consequences for example illness. It is quite obvious that physical or mental health problems can limit someone's occupational performance and participation. The same apply for living in or the threat of poverty due to debts. Therefore it can be seen through an occupational therapy perspective and maybe as a future issue for occupational therapists. Based on this matter of facts we focus on the life with debts. Our research question is as follows: How do four debtors tell their life stories to find out: if guidance and enabling people with debts to handle their life could become a new field of occupational therapy?

What has to be kept in mind, if your client is in debts and does it influence occupational therapy?

To answer these questions we decided to take interviews with four co-workers of the local street newspaper „Kupfermuckn“, who are living in debts and in the danger of homelessness.

For gathering the required information about external circumstances and narrative data of four people living in debts, we used the MOHO based “OPHI-II”

Appendix presentation 10.2

10.3 A good life in Denmark

Louise Iversen, Penille Mastrup & Nanna Christensen (University College Lillebaelt, Odense, Denmark)

This project is in collaboration with the Association of Children from Greenland and is related to Occupational Therapy because these children in Denmark are a vulnerable group and some of the children have problems related to sensory integration and to everyday living. The project “A good life in Denmark”
has existed in 2 year the purpose of the project is to support the children’s development and improve their health and social care. The children are between 9-17 years old.

The purpose of our project was to offer the children experiences and we contributed with a part about sensory integration one of their weekends. It was primarily to make the girls calm in the night and feel their body and to be aware of their boundaries.

We had two interventions on two separate sessions. The first intervention was in the evening, when it was dark outside and concerned tactile sense. The next session was in the morning, just after breakfast, because we hoped to get their arousal up and make them ready for a new day. It was mostly focused on stimulating the other senses than the tactile.

Appendix presentation 10.3 (PDF)

Appendix presentation 10.3.1

10.4 Implement occupational therapy in the mental healthcare

Rosanne Veld, Linda Vink, Miriam Wins, (Hogeschool van Amsterdam, The Netherlands)

Our project has started with the question: What can occupational therapy mean for children with a mental disability and is there any opportunity to implement occupational therapy?

We have started collecting information about the target group, what occupational therapy can mean/do for them and what kind of influence occupational therapy has in the mental healthcare. The information that we can use for our project goes to our employer from De Bascule.

When there is enough useful information (which has to be evidence-based), we want to give a presentation at De Bascule to convince the other disciplines of the added value.

The presentation has various subjects: how can occupational therapy help when you have mental problems? What is the target group? What kind of instrument can we use for the target group?

It’s important that our information (found using different databases and various literature), is evidence-based.

After the presentation we hope that we have convinced the other disciplines and make them see that occupational therapy has a value and can mean a lot for the target group of mental healthcare.

Also we hope for a cooperation contract with De Bascule.

Why De Bascule? Because we want to convince the different disciplines who are working there, that occupational therapy can work. These disciplines are: psychology, psychiatry, social workers, etc.
10.5 Contrasts between rich and poor in the Danish community

Line Hansen & Tina Bonde (VIA university college Aarhus, Denmark)

We want to bring to public awareness the injustices that the poor and homeless population experience in daily occupations and clarify the voices of the weak and exposed in the Danish society. We have chosen to show this occupational injustice by means of pictures that illustrate contrasts between rich and poor as they are showed in the street scene for example a fancy car versus a wreck of a car etc.

The background of the project is that there exist many different definitions of poverty. The definition of the European Union is that the poverty line is 60% of the median income of the population. OECD has a definition that is 50% of the median income of the population. In Denmark there exists no poverty line so how can the public sector determine if a person lives below the poverty line. We want the politicians to make up their minds about whether we need a Poverty line or if it will stigmatize the specific group of people.

10.6 Implement occupational therapy on “de Heldringschool

Esther de Haan (Hogeschool van Amsterdam, The Netherlands)

I started a project on a school for students with an intellectual disability in the age of 12 to 20.

The school is called: “the Heldringschool” in Amsterdam. There was no special occupational therapy department on that school.

The students get lessons in activities which are necessary at daily living, but there was no special method to learn them those activities in a good manner. The question for me was to find out a special method, with what the children can learn the activities independent.

After some research, conversations with teachers and students and an activities analysis, I have made a photograph book of an activity. I took pictures of the students, whereas they carried out the activity (on their own way). I processed these pictures in a book. I added words, as little as possible, and I joined pictograms which have been used on school. The students found it very fine to work with it and the activities went much better. So I made much more photograph books concerning activities of daily living. After all photograph books have made, I instruct the teachers how they must use the books. I also help students who have “other” problems with daily activities. Because of this the question came if I want start a
practice in the school for occupational therapy. So I am busy now to find out a way to start a department of occupational therapy, when I am graduated.

Appendix presentation 10.6

11.0 Session 6 (Room 115)

11.1 Participate: Fostering Ambition in the Face of Social Exclusion - A community based Occupational Therapy Project

_Eileen Mooney and Siobhan O’Grady, Practice Educator: Alison Warren (University of Limerick, Ireland)_

There is a need for Occupational Therapists to address the challenges of inequality and poverty (Pollard et al., 2005). Participation in education is a powerful predictor of health and mortality (BMJ 2001 cited in Community Workers Cooperative (2004). Occupational Therapists are well placed to empower individuals with the foundation skills needed to encourage and facilitate participation in education.

Areas of Limerick City, on the west coast of Ireland, have experienced serious social problems and high-profile criminal activity over many years. Poverty in the area is perpetuated by a high unemployment rate, a high proportion of one-parent families and significant educational disadvantage (Fitzgerald 2007).

AccessCampus is a Study Club which was set up in Limerick City in 2007 to enhance the educational potential of pupils in the local communities, thereby breaking the cycle of poverty. In 2009, the first Role Emerging Occupational Therapy student placement began on site. The Canadian Model of Occupational Performance was used to analyse the needs of the pupils in the Study Club. On the basis of the findings, the Occupational Therapy students developed a group entitled _Participate_, which was a Vocational Exploration Workshop. The preliminary weekly group of ten to twelve members focused on teambuilding, group cohesion and generating ideas through creative activities. Central themes of the group included; building self-awareness and encouraging students to envision their future. The group exercises encouraged the pupils to recognise their potential in spite of the barriers erected by the structures of social exclusion in which they live.

Appendix presentation 11.1

11.2 Motivation First: Occupational Justice and Unemployment

_Kirsi Hyvärinen, Sari Hyrynen, Metropolia University of Applied Sciences, Finland_

The amount of young adults without a study or a work place in Finland is constantly growing. At the moment the Finnish welfare state has to deal with a recessionary period. This makes it more difficult for young people to be active members of the society. The opportunities to work have diminished, getting a
study place after comprehensive school is not obvious either and there are also lots of young people who drop out of school. Also the life-situations which these young adults try to make an effort from may nowadays be very challenging.

Our way of combating poverty and social exclusion in this project was to test a new working method in preventing young adult’s’ alienation from the society. We want to find out if a participatory occupational justice framework can be usefully applied to the municipal work that reaches out for the risk group. Our perspective was client-centred but then also concerns the wider community level. We used The Occupational Performance and History Interview (OPHI-II) to get an understanding of one young woman’s situation and then we analyzed the answers using the Theory of Occupational Justice.

We let the voice of one person be heard and we took a closer look at the occupational injustices which occur in her life. The results were shared with the municipal outreach work team. They will get acquainted with an occupational therapy viewpoint and it is possible that new ways of co-operation between Finnish outreach workers and occupational therapists can be formed.

Appendix presentation 11.2

11.3 An occupational perspective on asylum seeking unaccompanied children

Malin Ekerheim Hultin, Erika Gustafsson, Veronica Ideskog (Jönköping University, Sweden)

Our target group is unaccompanied children/youth in Jönköping, Sweden. The number of unaccompanied children seeking asylum has increased dramatically in recent years. Many of these are suffering from strong anxiety and depression, and some of posttraumatic stress disorder (PTSD). Save the Children (2010) state that children of foreign origin are in danger of falling into poverty and ill health. As future occupational therapists, we wanted to approach this community as resourceful individuals through enabling empowerment, participation and meaningful occupation. The purpose was to examine how occupational therapists can improve the situation for unaccompanied children and the objectives were to strengthen an occupational health. Our community is a group of asylum seeking boys 16 – 18 years old from Afghanistan, who are living at Salvation Army Refugee Aid’s (SARA) housing. The methods used in the project to achieve the objective were mainly literature research, interviews and intervention planning, using the PEOP model.

Appendix presentation 11.3

11.4 Children of mentally ill parents are poor in occupations and experiences

Camilla Langelund, Camilla Jensen (VIA University College in Aarhus, Denmark)

When spoken of poverty, economics and homelessness often comes to mind. The fewest think about the possibility of being poor on activities and experiences.
About 30,000-60,000 children of mentally ill parents in Denmark are categorized as socially disadvantaged, and just this group perceived to be poor in activities and experiences. First of all there is the economic perspective of the problem, as mentally ill parents often are on low income, second of all these children are also being required to assume the parental role when mom or dad is ill and unable to handle everyday life.

When the group of children with mentally ill parents experience being poor in activities and experiences in everyday life, they may come to feel excluded in relation to other children. Some of these children experience that it is not possible to hold their own, or even participate in other children's birthdays, they cannot attend in the excursions etc. All this can prevent these children from building their own occupational identity when not experiencing an active occupational participation with their peers.

These two aspects prevent the child to maintain an activity pattern that simultaneously reflects who the child is as an occupational performing human being - so the child does not develop an optimal nor independent occupational competence.

We know that health and well-being depends on participation and engagement in occupations and as an occupational therapist we seek to enable empowerment and occupational justice. Our main focus was to find, what was needed and what would make a difference to this group in their everyday life.

Appendix presentation 11.4

11.5 Research on the inclusion of disadvantaged children in a youth movement

Sarah Ver Eecke, Astrid Lannoy, Marieke Decraene (Howest department Renaat de Rudderlaan, Belgium – Kortrijk)

The project we proposed on the Enothe-congress is about a study on the inclusion of disadvantaged children in a youth movement. We focus us in particular on the Chiro since we all three are leaders in this youth movement. The members who may come to the Chiro are between 6 and 18 years old. In this youth movement is a weekly activity organised, always on Sunday afternoon of 14 o’clock to approximately 18 o’clock.

We investigated what efforts and features are available from Chiro National and from the Chirogroups itself to reduce exclusion. We also investigate how Chirogroups from the region of West-Flandres encourage this inclusion. This by making contact with the Chirogroups on autonomic base and take a visit where we can talk about the opportunities for underprivileged children in their organisation. We are very interested in the experience of the leaders and the children themselves, it seemed to us that it would be an enrichment to approach the research from different view angles. We are also going to take of child-friendly surveys with different Chiro groups to present the effect of this weekly activity on the children. These surveys are standardized and scientifically based. During the purchase we were trying to reach the entire group on a very subtle way to let the persons that are involved tell what their experiences are. This research was done on emotional and social terms. We can possibly search after the research to opportunities and facilities that
can encourage even more inclusion and innovation and bring more attention to this important aspect of our society.

Appendix presentation 11.5

11.6 Combating Social Exclusion through Empowerment

Niamh O’Grady, Joanne Fahy (NUI, Galway, Ireland)

The focus of the European Union throughout 2010 has turned to combating poverty and social exclusion, a movement spearheaded at the 2000 Lisbon summit.

Social inclusion can be described as actions which increase the participation of the marginalized and poverty-stricken in independent decision-making, and aims to improve the standard of living and overall well-being of such individuals (Combat Poverty, 2010). Substantial literature has shown that socio-demographic and social-psychological characteristics such as marital status, household composition and social support are associated with differentials in health and mortality in older age groups (Grundy & Sloggett, 2003). This highlights the importance the provision of social supports in combating social exclusion.

This project was based on two Occupational Therapy students who worked with an organization who promote social inclusion by offering support services for older adults in the local urban area. It aims to offer invaluable social contact to support the older adults in living independently and also to overcome isolation. Our aim was to illustrate how occupational therapy can make a difference to this organisation by empowering the service users to make decisions for their organisation with the goal of providing them with a sense of ownership of their group.

Appendix presentation 11.6

12.0 Walkie –Talkie

A nature walk, during which the future of ENOTHE was discussed.

Summary of written feedback of the Walk n Talk – Stockholm 16th of October 2010

12.1 Your Head of Department is questioning your membership of ENOTHE. Which arguments would you bring forward in order to keep your membership of ENOTHE?

It is necessary for the international position of the institution.
Membership is contributing to the overall strategic plan for the University - extended internationalization.
It means that you are a part of an OT community
It provides the members with:

International visibility
Updating on the international Trends of OT, (Focus on the European themes of the year) and EU politics.
Broader view and contacts to others.
Update on research subjects and educational methods.
Possibilities for international cooperation / collaboration and networking and discussions about the same topics cross Europe.
The opportunity to arrange student mobility – and teacher mobility
Input and ideas on intervention, education, projects.
New perspectives and view of different cultures.

It contributes to:

Quality assurance.
Benchmarking - check the position of the school compared to other European schools. Inspiration for professional development.

It brings dynamic and inspiration to curricula and curricula development.
Prepares the student for a European labour market.

12.2 You have some work to prepare. You go to the ENOTHE web site what would you like to find there, that would help you in your preparation?

- Research projects and methods – guide for students and teachers.
- Inspiration to topics projects, BA thesis.
- Links to e.g : EU and WHO documents
- Power points from meetings
- Reports and Results of workpapers and projects.
- Definition of key terms, described modules, book reviews, CBR-good practice.
- Pictures of the ENOTHE members
- All hand outs before the meeting takes place.
- Examples of IP projects.
- OT specific information about the countries
- Fieldwork placements practice – how / where to find placement abroad. Student exchange possibilities – give and take..
- Searching for potential partners.
- The TUNING competences,
- Ideas for Pedagogical and didactic approaches.
- Updating the ideas e.g. about activity analyses
- Instructions in how to apply for EU funding
- Dating site where you can find future partners in developing teaching materials
• Addresses of schools – profile of the institutions, so you can see if they specialize in certain subjects.
• Curricula from different institutions, examples of assessment, development projects regarding teaching methods and study activities.
• Forum where you can ask questions – who knows, who have tried, any idea of how??? Etc.
• OT master programs
• Information about ENOTHE – who is and the history?

12.3 You are a newly elected board member of ENOTHE. Identify three actions that could contribute to the continuing development of OT in Europe?

Organize the web site better – develop website – discussion forums
OT in Europe policy – respond consulting papers
Be aware of different levels of education bachelor – master – PhD
Stimulate IP programmes – in CBR
Create a European framework to tune the profession of OT.
Host and organize meetings – in OT developing countries
Forum to exchange between schools – thematical.

Make project groups – thematic project groups. Stimulate projects about CBR module. Fundraising for new projects with extra attention for new participants.
More activities for the students
Include fieldwork educators more active in ENOTHE
Increase multidisciplinary inputs in ENOTHE meetings
Establish workshops in annual meetings where you can brainstorm new projects which can be performed by different countries.
More time to network at meetings networking with other (social) networks.
Interdisciplinary work – changing roles of OT.
Education- health care –social sector – cooperation.
Work for at least one master degree in OT in each language in Europe.
Create a forum to disseminate information in each country.
Clarify the OT identity – master something (occupation) instead of everything.
Board members need training in influencing and accessing decision makers.
Structures to enable more networking between member and not just project groups
More cooperation between schools – exchange, projects, teaching
Clearing house.
We recognize the diversity in OT in Europe due to very different needs and demands and social systems but we should focus on our core competences and values and let our differences’ inspire us
To educate OTs for a future demands constant reeducation, entrepreneurship, innovation and creative thinking.
Continuing focus on education – experiences and development.
Focus on the development of teachers function and role.
Assessments – meaningful and relevant

12.4 In which ways are students involved in the ENOTHE network in your institution?

They participate in stud. workshop, present projects.
They attend the meeting.
We stimulate participation in the annual meeting.
We want them to join the student projects in the future. It will become a part of the syllabus, then it is easier to realize. They will get credit for attending with projects. We would like to plan project presentation in the future- hopefully in cooperation with other European schools.
We make a follow up on the presentation after the meeting.
The students know ENOTHE and the objectives of the network.
They were volunteers at the annual meeting when we where the host.
They use ENOTHE module on activity analyses.
They are not involved. We tried very hard but have not succeeded.
Each year 2 students submit projects. It is not enough – this year we have worked for more involvement.
It is important for them to meet the wider OT world.
They are only informed in their first year after our visit to the conference.
We will bring student next year – it is depending on the price and the funding possibilities.

13.0 General Assembly

Appendix presentation 13.0

14.0 Student forum

The main issue discussed at the student forum was the future meetings and how the students could make the most of them. The students from Artevelde Hogeschool who will be hosting the next Annual meeting
informed the forum of their plans to create a FACEBOOK group in order to enable the students stay connected with one another and receive all necessary information concerning the meeting.

Saturday 16th of October 2010

15.0 Facts and Fiction on Global Health

Professor Hans Rosling, Karolinska Institutet

The presentation of Prof Hans Rosling could be found by surfing on this website: www.gapminder.com

15.1 The threat of poverty and social exclusion in a life with long term impairments. Some considerations on the roles and responsibility in the future.

Jette Bay, Chairman of the Health Committee of the Danish MS Society

Appendix presentation 15.1

15.2 Lived experience and functioning in everyday life following stroke.

Professor Kerstin Tham, Head of Department of Neurobiology, Care sciences and Society, Karolinska Institutet

Appendix presentation 15.2

15.3 Panel discussion - Occupational therapy in the future. The social arena versus the medical?

(OT in refugee camps, OT in prison, OT in homelessness, OT in schools to prevent social exclusion, OT to support knowledge of societal habits and routines in the new culture)

Gaynor Sadlo, Brighton University, Hanneke van Bruggen, Hogeschool van Amsterdam, Hans Jonsson, Karolinska Institutet, Lena Borell, Karolinska Institutet

Appendix presentation 15.3
15.4 Summary of conference.

Barbara Piskur, Hogeschool Zyud, Chris Mayers, York St. John University, York, Sarah Quinn, Trinity College, Dublin, Sissel Alsaker/Horghagen, Trondheim University, Staffan Josephsson, Karolinska Institutet

Appendix presentation 15.4

15.5 Welcome presentation for the 17th Annual ENOTHE meeting in Ghent, Belgium

Appendix presentation 15.5