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Pause, reflect, reframe: Deep discussions on co-creating a decolonial approach for an antiracist framework in occupational therapy

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PAUSE, REFLECT, REFRAME

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[Editor's note: This article uses UK English to reflect diversity in language as represented by the authors.]

PAUSE, REFLECT, REFRAME

It is no longer a question of *if* the profession is racist; it is a matter of telling the truth about how, where, and when racism occurs within occupational therapy's structures. Since 2020, tackling institutional racism within this profession has occurred at pace with activist scholars and collectives taking direct action—for example, an open letter to the Royal College of Occupational Therapists from BAMEOTUK Network (2020). These acts of open protest have forced the profession to discuss racism after 104 years (Kronenberg, 2020). Liberation is about *process* and *outcome* and is perceived in the briefest of conversations and largest of rallies. If antiracism is collective liberation (North American Students of Cooperation, 2015), then liberation and the status quo of the profession are currently incompatible.

Knowing this, disrupting racism within the profession must extend to practice models, attained by—but not easily—altering the process of model development so that the *process is itself* decolonising. Antiracism and *liberation as process* centre collaboration that deeply examines the structural and environmental conditions that promote and hinder equity and justice, thus enabling impactful change. To date, racism and oppression have not been, cannot be, and will not be disrupted from the Global North segment of the profession because there is no plan to end them. After decades of bearing witness, Global South heritage *disruptors* (fighters of all forms of discrimination and oppression) and *co-conspirators* (collective of disruptors) from the profession, such as the DisruptOT collective, gather to share reflections, to strategise, and for community and agency.

This reflective commentary is written by four occupational therapists, one of whom is also a social worker. We are cisgender women of different ethnic, sexual, and ability identities. We each bring unique experiences and perspectives and use these when storytelling to disrupt the

PAUSE, REFLECT, REFRAME

status quo of institutional racism (Bell, 2010) in occupational therapy education and practice. In September 2021, following the first DisruptOT summit, we gathered to discuss co-creating a preliminary concept map for an antiracism occupational therapy framework. A visual was inspired by the Power and Control wheel and corresponding Equality wheel developed by the Domestic Abuse Intervention Project (1984) in Duluth, Minnesota, and the Dismantling Racism wheel created by the Women of Color Caucus and Social Justice Task Force of the Virginia Sexual and Domestic Violence Action Alliance (2014). There are many versions of these wheels used in several languages for anti-oppression and antiracism work worldwide as they are open sourced for this purpose (Immigrant Women’s Support Service, 2021). They inspired us to consider how occupational therapy education, practice, research, and policy might benefit from antiracist frameworks. As we started imagining possible adaptations, our conversations integrated intersectionality, that is, critical race, gender, sexuality, class, geopolitics, and ability lenses to occupational therapy. Here, we outline aspects of the collaborative process of exploring the potential of and for an antiracism model of practice in occupational therapy, which demands active creation and coproduction of equalising conversations between disruptors and co-conspirators.

“To me, the circle shape reflects cycles in nature and helps remind us humans that we are part of nature. Circles are engaging and seem to denote perpetual motion—dialing, rotating, revolving, always in motion.” (Isla)

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The pause

During our first virtual meeting, we spent time building connections to engage in a sacred process of honouring each other's stories, ancestors, lands, drives, and trauma. However, in a response to a rush to meet a deadline, we arrived together to a kind of pause, a comfortable silence, to question our reaction to fill a predetermined gap and, consequently, the possibility that we may be recolonising a professional conversation rather than sharing our agency, energy, and humanity. Audre Lorde cautioned that change does not happen by using the "master's tools" (1984). We needed to find the questions we wanted to answer (Cojocariu & Butnaru, 2014) to avoid recycling a colonial vision of wellbeing and healthcare.

"To me a circle speaks of the whole of life." (Rebecca)

Reflect: What are occupation and occupational therapy?

These questions arose early, perhaps as a search for common ground and to ensure that we actively resist assumptions about having a shared understanding of these concepts. Almost immediately, we came to the well-trodden track that occupation is defined and understood so differently and expansively and that, in fact, this was not common ground for us. We agreed that much of the profession's infrastructure is dominated by the ideological parameters and philosophies of the English language, potentially limiting collegial sharing of global theorizing, education, and practice of occupational therapies (Guajardo et al., 2015).

We fostered our accountability by sharing personal and collective intentions and exploring what lenses we bring to this work. The collective nature of this process was critical, and so the space created was affirming and equalising. Deep acknowledgement is part of the re-

PAUSE, REFLECT, REFRAME

humanising energy and conscious healing that people can bring to each other. We all noted that this kind of process is rare within the profession's mainstream spaces and shared our frustrations with the over-representation of colonising ideologies and practices. The decolonisation energy of reverently perceiving each other as contributing, dedicated, and whole humans guided our exploration of possibilities rather than crystallising concrete answers, tick boxes, and checklists.

During our second meeting, where we considered the next draft, it became even clearer that we could not treat this as a production line for a well-defined end product-as-outcome. The connections that are so important to enabling potential co-creation of an antiracism wheel(s) for occupational therapy require time and global collective voices. In this meeting, we shared our individual experiences of confronting racism in professional settings and the resulting exhaustion. This unfolding led to conversations about who bears the responsibility for doing “the work” of disruption and liberation. Evidently, engagement in self-reflection and cultural humility have not unburdened the load. We considered the social change process of domestic violence and how, initially, the burden for change was placed upon “victims” or “survivors” of the violence, often women, rather than perpetrators who were generally, though not always, men. Similarly, and in spite of privilege and opportunity, our collected experiences highlight that the Global North is yet to meaningfully share in the heavy lifting of disruption and liberation.

Reflect: Why do we still think that models of practice will be universally culturally relevant?

PAUSE, REFLECT, REFRAME

Global North theories and models are steeped in the values and ideologies of colonialism and dominate the profession (Hunter & Pride, 2021) despite negligence and even harm to racialised communities (Gordon-Burns & Walker, 2015). The epistemology of ignorance (Sullivan, 2007) is a useful lens to critique the profession's slippery relationship with knowledge. That is, amongst calls to develop frameworks, fill knowledge gaps, and unlearn racialised ways of knowing on a backdrop of institutional racism, one thing remains a constant: power remains where it is. Further, such solipsistic meanderings have yet to evidence either equity, an end to racism, or justice, occupational or otherwise (Emery-Whittington, 2021).

Occupational therapy was conceived under the myth that *by* white people is *for* everyone (e.g., Anderson & Reed, 2017; Wilcock, 2002). Occupational therapy has countless models and frames of reference to abstract and explain in order to plan how to meet the person's needs, but they are not explicitly representative of cultural relevance beyond Eurocentrism. This circles back to our original intention of creating an antiracist and liberation (Love, 2013) model that is fully conscious of power and intersectionality. Tapping into and making space for creative moments sparked imagery of circles, spirals, life cycles, and wheels, intersected to support and convey the energy of the spoken word to paper. We shared a number of philosophies and models, including elements of the Transcultural Model (Drabble et al., 2012) used within social work programs, which was created with attention to respectful partnership; positionality and self-reflexivity; awareness of power, privilege, and oppression; and cultural knowledges.

We recognised that constant vigilance during model development is necessary to prevent slipping into the colonising habit of promoting deficit-based approaches. Instead, we privileged actions and goals that promote justice-based approaches, meet needs, and honour rights of all

PAUSE, REFLECT, REFRAME

communities. In other words, people don't have to fit models; rather, models need algorithms of antiracism and liberation designed into them to honour all people.

“I associate it with the Wheel of Life, which represents the Karmic cycle of birth, life, death, rebirth, and everything associated with being.” (Sheela)

Reflect: How might an antiracism frame contribute to socially accountable occupational therapies?

There already exist an infinite number of possible solutions and concepts for socially accountable occupational therapies, such as occupational consciousness (Ramugondo 2015).

As our global equalising collaborative processes have shown, antiracist model development is not only possible but absolutely necessary wherever institutional and structural racism are experienced. When people connect with their therapist, they hope to be seen for who they are and all the social and occupational possibilities that exist for them and theirs. It is possible that antiracism occupational therapy frameworks might at a minimum provide a medium with which to check practices and organisations. Consequently, such levels of integrity and social accountability are supported by making the focus to be socially responsible first, especially as accountability alone is not enough (Davis, 2016). That is, to be socially responsible and accountable, we must be cognisant of the hegemony that is dominant in our current practices through the everyday and disrupt it (Ramugondo 2015).

PAUSE, REFLECT, REFRAME

“It’s just continuous, never ending, and that’s what the work for antiracism is; you have to keep checking you are fit for antiracist purposes as individuals, services, and organisations.”

(Musharrat)

Conclusion

We disrupted a “usual” process of initiating model development through the gentle acknowledgment of professional experiences of racism and oppression and our disinvestment in reproducing such processes. Using the imagery of circles/wheels, we contributed to a wider plan of socially accountable occupational therapies that might inform liberatory processes. What we learned is that the process and content of model development requires deliberate collaborations of global disruptors and co-conspirators, constant vigilance, and refusal to engage in colonising processes and habits, in order to foster social accountability enacting occupational consciousness. So, readers, where to now?

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PAUSE, REFLECT, REFRAME

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PAUSE, REFLECT, REFRAME

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