



## Addressing occupational deprivation as a way to reduce health inequalities

Carol Duff, Occupational Therapist, University of Lincoln

[cduff@lincoln.ac.uk](mailto:cduff@lincoln.ac.uk)

### Description

This example will consider how staff at the University of Lincoln are encouraging occupational therapy students to explore health inequalities through their studies of occupational deprivation and the importance of engaging with hard-to-reach groups in practice.

### Context

#### Aims and objectives:

- To increase student awareness of health inequalities.
- To enable students to apply an occupational lens to those issues.
- For students to ensure their practice in occupational therapy reached hard-to-reach groups.

#### Rationale for improvement

Graduates from the MSc Occupational Therapy will have the knowledge and understanding of the need to adapt their practice to ensure it includes addressing the needs of hard-to-reach groups in traditional practice, and they also are able to identify and build a case for roles in new areas of practice where OTs could be commissioned to address health inequalities.

### Method

Second year students at the University of Lincoln participate in a number of learning opportunities that are interlinked and address health inequalities in different ways. It starts with a module on Applied Health Improvement which is an interprofessional module that explores the principles of public health principles, the priorities and practice and the social determinants of health, illness and health inequalities, which enables students to get a baseline understanding of health inequalities and they start to identify who the disadvantaged groups are. They then pick this up with an occupational lens in their Occupational Therapy module. In this module students explore their understanding of occupational deprivation and get a deeper understanding of who might be occupationally deprived and how they might identify and address the needs of those peoples.

As occupational therapists we see many people who are occupationally deprived and a wide range of reasons why. Working holistically and using a biopsychosocial approach the students use case scenarios of people who may be occupationally deprived as result of a range of factors such as disability, injury or illness, or as a result of their social circumstance or their individual diversity. We also explore the needs of people who have what may be described as “dark occupations” or occupations that may be less socially acceptable. The students focus is understanding what are the ‘push and pull’ factors for these occupations and how could they address the occupational needs of these people.

These activities are followed by a role emerging or extended scope placement where students get an opportunity to work with a charity or non- traditional organisation, many of which are trying to address the needs of hard-to-reach groups and who don’t have occupational therapists working there to explore how occupational based practice could help. Examples of the hard-to-reach groups students have supported are perpetrators of domestic violence, homeless and refugees. This gives students real insight into how they can address health inequalities of their population in practice.

## Outcomes

Students have a real opportunity to demonstrate their understanding of health inequalities and how to address them and this is assessed in their summative assessments. As a result of role emerging placements there have been occupational therapy posts created or students have left a legacy to support existing staff to meet the occupational needs of their service users. One example was following a student working with a care farm. The student worked with children and adolescents with behaviours that challenge and many of whom are excluded from school and as a consequence occupationally deprived. The student was able to identify that an occupational therapy assessment identifying the needs of the child, addressing the barriers to occupations and offering interventions to support ways for the child to engage in meaningful occupations. This led to an OT post being created at the organisation and as a result most children are transitioned back into the school environment in a timely fashion and in a sustainable way with the right level of support to engage in their required occupations. The long-term effects of being in education reduce the likelihood of future health inequalities.

## Key learning point

All students graduating have a clear understanding of groups of people who may be occupationally deprived. The connections between the academic modules and the practical placement allow them to fully explore the realities of addressing occupational deprivation and are alert to the consequent impact on the health and wellbeing of the individual.