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## Anti-racism and Occupational Therapy Education: Beyond Diversity and Inclusion

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# Anti-racism and Occupational Therapy Education: Beyond Diversity and Inclusion

## Abstract

There is a pressing need to address racism within healthcare education; however, occupational therapy educators lack a compilation of discipline-specific knowledge of anti-racist actions. The objective of this study was to examine anti-racist instructional practices for educators to employ in occupational therapy education. We conducted a scoping review and systematically searched six electronic databases to identify and synthesize anti-racist educational practices within the occupational therapy literature. The 20 included articles identified that educators should: use collaborative, anti-racist teaching strategies throughout the curriculum; engage in reflexivity including how intersecting identities impact occupational engagement; decolonize curricula through including Indigenous content and non-Western practice frameworks; increase representation of Black, Indigenous, and other People of Color students and faculty; and strengthen educators' capacity to engage in anti-racist actions. To address systemic injustices to educational inclusion and prepare students to address health care inequities, occupational educators must engage in anti-racist actions across curriculum, programs, and universities.

## Keywords

Decolonizing, occupational therapy, cultural humility, reflexivity, BIPOC

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**Anti-Racism and Occupational Therapy Education:  
Beyond Diversity and Inclusion**

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**ABSTRACT**

There is a pressing need to address racism within healthcare education; however, occupational therapy educators lack a compilation of discipline-specific knowledge of anti-racist actions. The objective of this study was to examine anti-racist instructional practices for educators to employ in occupational therapy education. We conducted a scoping review and systematically searched six electronic databases to identify and synthesize anti-racist educational practices within the occupational therapy literature. The 20 included articles identified that educators should: use collaborative, anti-racist teaching strategies throughout the curriculum; engage in reflexivity including how intersecting identities impact occupational engagement; decolonize curricula through including Indigenous content and non-Western practice frameworks; increase representation of Black, Indigenous, and other People of Color students and faculty; and strengthen educators' capacity to engage in anti-racist actions. To address systemic injustices to educational inclusion and prepare students to address health care inequities, occupational educators must engage in anti-racist actions across curriculum, programs, and universities.

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## Introduction

Sparked by the deaths of Black people due to structural racism and police brutality, in 2020 Black Lives Matter protests globally brought greater attention to the centuries long issue of inequality for *Black, Indigenous, and other People of Color* (BIPOC). The protests galvanized public action for social justice and drew greater attention to the role that structural racism plays in undermining the health of BIPOC. Health professionals and educators across fields were called on to address the rampant systemic racism within health care and consider how anti-racism is taught within health fields. Across health professions, professional associations such as the American Medical Association (2020), American Physical Therapy Association (2020), and American Occupational Therapy Association (AOTA; 2020a) issued anti-racist statements. Furthermore, an increasing amount of literature was published by health educators who critically questioned the pillars of health education systems and advocated for classroom learning that moves learning beyond conversation to active engagement (Paton et al., 2020).

As a health profession, occupational therapy also recognized a need to better address inequities in health care services, and the education, recruitment, and retention of BIPOC students and faculty, through a commitment to prepare a workforce to meet the diverse needs of society (AOTA, 2020b). As a profession founded on social justice (Bing, 1981), occupational therapy previously recognized and incorporated the teaching of cultural competence, implicit bias, diversity, and inclusion in entry-level education programs (Grenier et al., 2020). However, in this paper we argue that a shift towards anti-racism needs to be prioritized. Beyond teaching occupational therapy students how to understand diverse needs (e.g., cultural competency), educators must be prepared to teach students how to be anti-racist and work with BIPOC clients whose health is negatively affected by racism. As a health profession grounded in interactional models with increasing collaborations with disability studies (McCormack & Collins, 2010) and disabled persons organizations (Njelesani et al., 2018), diversity and inclusion are part of the discourse in occupational therapy education. However, to advance racial equity, only focusing on diversity, such as simple numeric diversity, may limit achievement of a broader vision in which “racially diverse perspectives are embedded in power structures, policy-making processes, and the cultural fabric of organizations” (Jayakumar et al., 2018, p. 11). Healthcare scholars from other disciplines have emphasized the importance of explicitly naming and addressing how racism shapes policies, practices, norms, and values (Kumanyika & Jones, 2015). Specifically naming racism and doing anti-racism work is important for the field as current definitions and operationalization of diversity are problematic with a lack of a consideration of race and little critical attention to ethnicity (Grenier et al., 2020). In the latest AOTA Statement on Diversity, Equity, and Inclusion (2020c), anti-racism is not specifically mentioned. AOTA’s Statement on Justice and Systematic Racism (AOTA, 2020a) acknowledges and condemns the multifaceted aspects of systemic racism and oppression against BIPOC in the United States but does not offer any specific actions to mitigate racism. A recent scoping review examined anti-racist practice actions (Sterman & Njelesani, 2021), but did not address educational considerations.

Despite these important statements and publications within the profession, occupational therapy educators wanting to incorporate anti-racism teaching that includes specific considerations for entry-level education have little to draw upon, as to date anti-racist instructional practices from within the occupational therapy literature have not been systematically collated. Occupational therapy specific considerations could be used in conjunction with the current breadth of anti-racism resources for educators (Lykes et al., 2018; Harbin et al., 2019). Therefore, to understand how to best employ anti-racist instructional practices in the education of occupational therapy students, we conducted a scoping review. No previous review on anti-racism in occupational therapy education has been conducted, with limited reviews found across other health professions (Coleman, 2020; Hays et al., 2021; Olcoń et al., 2020).

We acknowledge the anti-racist scholarship by BIPOC and critical race theorists who influenced our thinking, and in this paper, we use Kendi's (2019) conceptualization of anti-racism, in which anti-racism requires active dismantling of the ideas and structures that reinforce racial inequality. Key to this definition is action-oriented strategies, that seek to confront, eradicate, and ameliorate racism (e.g., challenging discriminatory policies and problematic norms, dismantling racist power structures), focusing on equitable outcomes, rather than uniformity, that is more akin to inclusion. Additionally, "White supremacy can be understood as a system of racial domination and exploitation where power and resources are unequally distributed to privilege whites and oppress People of Color" (Perez Huber, 2010. p. 79).

We recognize the privilege from which we write. Our research team was comprised of one occupational therapy practitioner and two occupational therapy faculty members living in the United States. All of us were trained in programs founded on White, North American dominance in which knowledge production of Western science was most valued. The first two authors are White, cis-gender, non-disabled, female, occupational therapy academics and the third author identifies as a Black, non-disabled, cis-female, occupational therapy practitioner. The first two authors identify similar to the majority of the occupational therapy profession in the United States, with over 87% being White (DATA USA, 2016), and recognize how much White supremacy, from which they always benefit, enabled their access to educational opportunities in occupational therapy and the current positions they hold. Together the authors aim to strengthen student education in occupational therapy programs to prepare them to offer quality anti-racist services to all clients and advocate for historically marginalized communities and individuals. We recognize this paper is one small piece of the work with a lifetime of listening, learning, and resisting White supremacy required.

### **Methods**

A scoping study was conducted following the Arksey and O'Malley (2005) framework and detailed below in accordance with the Preferred Reporting Items for Systematic Reviews and Meta-Analyses Statement for Scoping Reviews (PRISMA-ScR; Tricco et al., 2018), which provides a standardized format for rigorous assessment of the literature.

**Research Ethics and Patient Consent**

Research ethics approval and gaining consent were not required for this scoping study as no participants were involved.

**Eligibility Criteria**

Studies were eligible for inclusion in this scoping review if they described, developed, proposed, applied, and/or evaluated anti-racist actions in occupational therapy education. Anti-racist actions were described as any activity that addresses or reduces racism experienced by the identified population. Only English written journal articles published between 2000 and January 2021 were included. Articles published since 2000 were included due to the shift in the occupational therapy literature to be more aligned with anti-racism (e.g., from cultural competency to cultural humility). All research study designs were included. Review articles, conference abstracts, and studies where full-text was not available were excluded. Articles on fieldwork education were excluded.

**Information Sources and Search**

Six electronic databases (PsycInfo, ERIC, CINAHL Complete, OT Seeker, Web of Science, Scopus) were searched to identify potentially relevant articles. The search strategies were drafted and then piloted and refined by team members. Search terms related to the review aim were used (see Table 1 for search terms). A hand search was conducted in the following journals: *Canadian Journal of Occupational Therapy*, *Australian Journal of Occupational Therapy*, *American Journal of Occupational Therapy*, *New Zealand Journal of Occupational Therapy*, *Journal of Occupational Science*, and *OTJR: Occupation, Participation, and Health*. The hand-search identified articles that may have been missed in the initial search and captured articles published online first. The final search results were exported into EndNote and duplicates were removed.

**Table 1**

*Title, Abstract, and Keyword Searches*

Occupational Therapy	AND	Anti-racism
Occupational therapy, Occupational therapist, Occupational science		Anti-racism, Racism, Cultural humility, Decolonizing, Occupational apartheid, Occupational consciousness, Social problems, Critical race theory, BIPOC, Diversity and inclusion, Social justice, Ethnic inequities, Oppression, White supremacy

### **Selection of Sources**

Covidence (Covidence systematic review software, n.d.), a systematic review management program, was used by two reviewers independently to screen and select articles for inclusion or exclusion. The first step included two reviewers screening the title and abstract of each article and indicating the study as yes (included), no (excluded), or maybe. Then, the full text of each included article was read and reviewed. Reviewers noted comments detailing the reasoning for exclusion. If reviewers differed in indicating an article as yes, no, or maybe, the disagreement was handled by meeting to resolve conflicts.

### **Data Charting**

A data charting form was jointly developed by two reviewers to extract the following information from each included study; source, year of publication, country of study, purpose or aim of study, population focus, methodology, and anti-racism actions for educators. Excel software was used to chart data from the articles. The chart was first piloted by two reviewers to ensure data could be extracted with one unique identifier, and then two reviewers independently charted data from each study. Any disagreements were resolved through discussion.

### **Synthesis of Results**

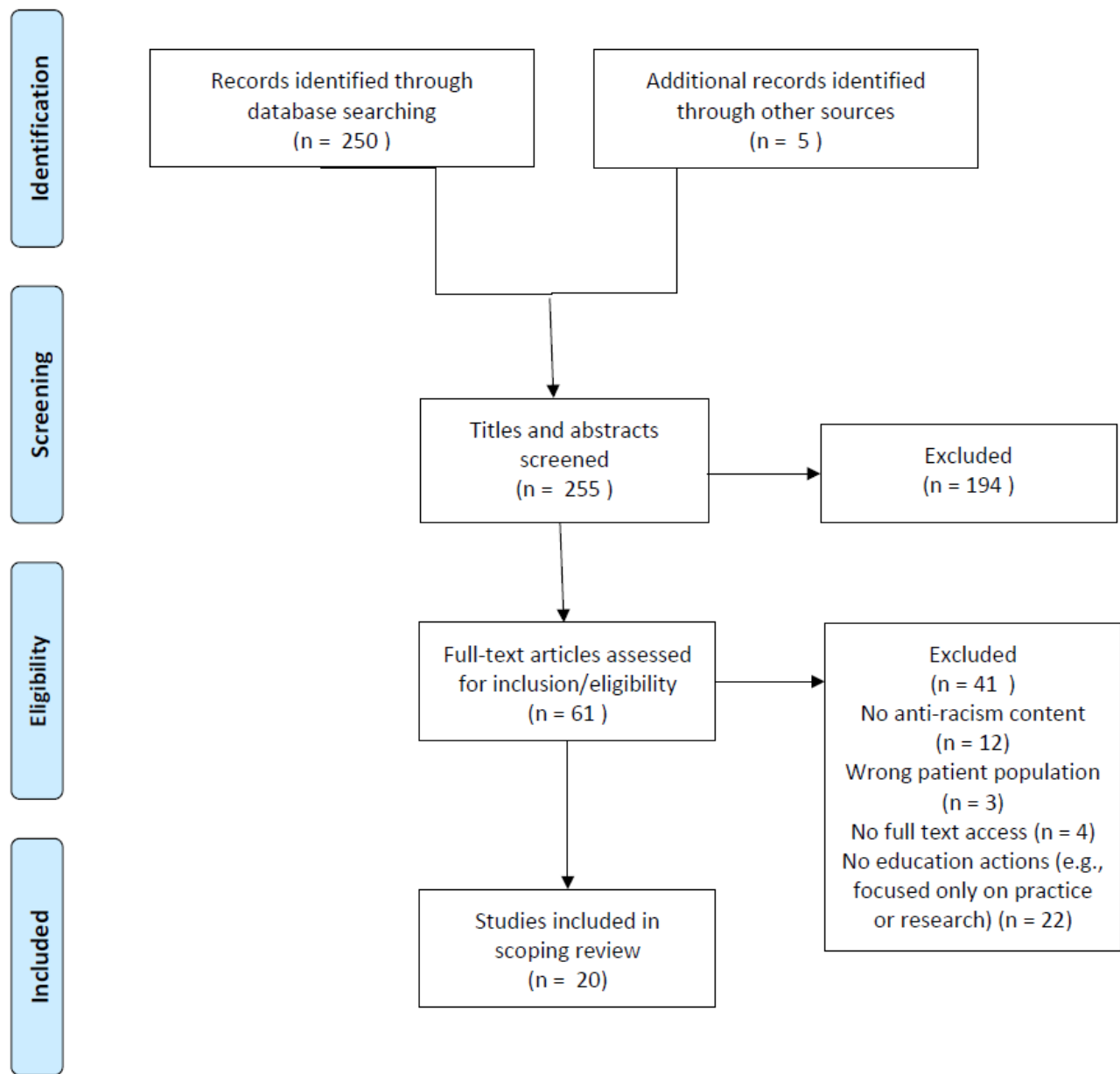
Charted data was synthesized, and anti-racism actions and strategies were grouped by two reviewers according to how they could be incorporated into occupational therapy education. The articles were not critically appraised, consistent with the purpose of scoping studies, which is to map what content is available on the topic.

## **Results**

### **Study Characteristics**

We describe the article selection process in Figure 1 using the PRISMA flow diagram (Tricco et al., 2018). The 20 included articles were published between 2006 and 2021, with seven published in 2020 and one in 2021. They all describe anti-racist actions for occupational therapy educators and programs. The authors were from: USA (8), Canada (6), Australia (3), United Kingdom (1), South Africa (1), and New Zealand/Aotearoa (1). The majority of articles were literature reviews, theoretical papers, or did not contain original data collection (14), with the remaining articles using qualitative methods (4) or quantitative methods (3). Ten of the articles did not specify a specific focal group for addressing anti-racism, but rather described anti-racism needed for ethnic minorities or non-Western peoples broadly within their countries. The remaining articles focused on the following populations: Indigenous Australians (3), Indigenous Canadians (4), Black Americans (2), Black Canadians (1), and Black South Africans (1). One article focused on both Black Canadians and Indigenous Canadians (Grenier, 2020). Table 2 includes a description of the included articles.

**Figure 1**  
*Article Identification and Selection Process*





**Table 2***Description of Included Studies*

<b>Author(s)</b>	<b>Title</b>	<b>Year</b>	<b>Country</b>	<b>Population of focus</b>
Agner, J.	Moving from cultural competence to cultural humility in occupational therapy: A paradigm shift	2020	USA	Ethnic minority/non-Western
Aldrich et al.	Translating occupational justice education into action: Reflections from an exploratory single case study	2016	USA	Ethnic minority/non-Western
AOTA (b)	Educator's guide for addressing cultural awareness, humility, and dexterity	2020	USA	Ethnic minority/non-Western
Bozalek & Biersteker	Exploring power and privilege using participatory learning and action techniques	2010	South Africa	Black (South Africa)
Ford et al.	Recruitment and retention of occupational therapy practitioners and students of color: A qualitative study	2020	USA	Ethnic minority/non-Western
Gibson	When the river runs dry: Leadership, decolonization and healing in occupational therapy	2020	Australia	Indigenous Australians
Gordon-Burns & Paraneha Walker	Institutionalized racism in the public health system	2015	New Zealand/Aotearoa	Indigenous Aotearoa/Maori
Grenier	Cultural competency and the reproduction of White supremacy in occupational therapy education	2020	Canada	Ethnic minority/non-Western
Hammell	Occupation, well-being, and culture: Theory and cultural humility	2013	Canada	Ethnic minority/non-Western
Hojjati et al.	Educational content related to postcolonialism and indigenous health inequities recommended for all	2018	Canada	Indigenous Canadians

	rehabilitation students in Canada: A qualitative study			
Mahoney & Kiraly-Alvarez	Challenging the status quo: Infusing non-Western ideas into occupational therapy education and practice	2019	USA	Ethic/racial minorities
Nelson	Learning from the past, looking to the future: Exploring our place with Indigenous Australians	2009	Australia	Indigenous Australians
Simaan	Decolonizing occupational science education through learning activities based on a study from the Global South	2020	UK	Ethnic minority/non-Western
Steed (a)	Caucasian allied health students' attitudes towards African Americans: Implications for instruction and research	2014	USA	Black (USA)
Steed (b)	The effects of an instructional intervention on racial attitude formation in occupational therapy students	2014	USA	Black (USA)
Taff & Blash	Diversity and inclusion in occupational therapy: Where we are, where we must go	2017	USA	Ethnic minority/non-Western
Thomas et al.	Occupational therapy at the "cultural interface": Lessons from research with Aboriginal and Torres Strait Islander Australians	2011	Australia	Indigenous Australians
Trentham et al.	Diversity and inclusion within an occupational therapy curriculum	2007	Canada	Ethic/racial minorities
White & Beagan	Occupational therapy roles in an Indigenous context: An integrative review	2020	Canada	Indigenous Canadians
Zeldenryk & Yalmambirra	Occupational deprivation: A consequence of Australia's policy of assimilation	2006	Australia	Indigenous Australians

Teaching Strategies

We identified 11 educational strategies used to teach anti-racism: discussion groups, lectures, reflection, educational technology, case-based learning, papers, presentations, readings, and videos to develop knowledge, awareness, attitudes, and skills (Agner, 2020; Aldrich et al., 2016; AOTA, 2020b; Trentham et al., 2007). Many articles recommended multiple strategies that incorporate reflective teaching and application rather than focusing on didactic approaches (Agner, 2020; Aldrich et al., 2016; AOTA, 2020b; Trentham et al., 2007).

The evidence indicated that teaching students about being anti-racist should come from a collaborative approach that focuses on joint learning and the process of teaching and learning (Mahoney & Kiraly-Alvarez, 2019). Several articles emphasized the need for anti-racist topics, especially examining White privilege, to be approached from an empathetic manner, that creates a safe learning environment (Steed, 2014b; Trentham et al., 2007). Students should be supported in learning how to examine their personal values and to advocate as allies, rather than focusing on placing blame (Steed, 2014b; Trentham et al., 2007).

Table 3 introduces content and theories that support anti-racist teaching in occupational therapy. Educators should embed anti-racist content throughout the curriculum, rather than solely in specific courses (AOTA, 2020b; Trentham et al., 2007). This supports multiple opportunities for learning, and topics of anti-racism as being seen as the domain of all instructors.

Table 3

*New Theories and Content for Anti-Racism Occupational Therapy Education*

Theories

- **Cognitive injustice** (Simaan, 2020) - Exclusion of other-than-Western types of knowledge
- **Culture Emergent Model** (AOTA, 2020b) – Reflection of cultural influences and biases
- **Intercultural translation** (Simaan, 2020) – Bringing together of different knowledges and epistemologies without silencing the different knowledges
- **Occupational justice** (Aldrich et al., 2016) – Rights of individuals to engage in meaningful occupations
- **Occupational consciousness** (Gibson, 2020) – Dominant practices and power structures are sustained by what people do every day
- **Social reconstruction ideology** (AOTA, 2020b) – How to use social actions to solve societal problems

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## **Content**

- Awareness of natural, unconscious, perceptual processes that lead to negative racial attitudes (Steed, 2014a)
  - Diversity and inclusion (AOTA, 2020b; Taff & Blash, 2017)
  - Exploration of cultural hypothesis and similarities and differences across cultures (AOTA, 2020b)
  - Self-examination and bias awareness (AOTA, 2020b)
  - Skills in critical thinking, advocacy, and exposing healthcare and societal inequities (AOTA, 2020b)
  - Social determinants of health, health disparities, and health inequities and their institutionally situated resistance to change (AOTA, 2020b)
  - Teach the concept of ubuntu by reflecting on how we are “doing together” as educators and students (Mahoney & Kiraly-Alvarez, 2019)
  - Critique existing occupational therapy models and practices themselves as to their potential to marginalize or oppress already marginalized groups (Trentham et al., 2007)
  - Identify creation of knowledge as core occupational therapy values (Aldrich et al., 2016)
  - Shift to using models of cultural humility (Steed, 2014a)
  - Shift in structural frameworks of how knowledge is constructed away from maintaining White supremacy (Grenier, 2020)
- 

## **Reflexivity**

A key finding across many articles was that students and educators must engage in reflexivity before they can engage in meaningful anti-racism actions to ensure they are not perpetuating inequities (Aldrich et al., 2016; AOTA, 2020b; Bozalek & Biersteker, 2010; Simaan, 2020; Steed, 2014b; Trentham et al., 2007; White & Beagan, 2020). Overwhelmingly, the evidence indicated that occupational therapy educational programs must include components of reflexivity, including considering students' and educators' beliefs, values, and assumptions and their impact on clinical practice (AOTA, 2020b; Trentham et al., 2007; White & Beagan, 2020). Specifically, each student should reflect on their cultural background, identities, perceptions of racism and prejudice, and areas of privilege and how they impact their perception of valued occupations, and attitudes and actions towards individuals whose backgrounds differ from their own (AOTA, 2020b; Trentham et al., 2007).

Rather than solely engaging in superficial topics on cultural differences (e.g., cultural competence), students should critically examine how some group's occupations can negatively impact other's occupations, and how promoting some occupations can be harmful for marginalized groups (Aldrich et al., 2020; Steed, 2014a). For example, Bozalek and Biersteker (2021) recommended that students engage in an activity where they map their communities to note areas of privilege and areas that require interventions to reduce inequities. Understanding their own background supports students to challenge the status quo when the status quo is a source of oppression (Bozalek & Biersteker, 2010; Grenier, 2020; Grenier et al., 2020).

### **Decolonizing the Curriculum**

Several articles described how decolonizing the curriculum requires the inclusion of content about Indigenous experiences (Hojjati et al., 2018; Nelson, 2009; Zeldenryk & Yalmambirra, 2006), non-Western ways of knowing (Mahoney & Kiraly-Alvarez, 2019; Simaan, 2020), and the complexity of culture (AOTA, 2020b). Currently, students, educators, and clinicians lack knowledge and confidence on Indigenous history, the occupational impacts of historical and present-day racism, and how to support Indigenous clients (Hojjati et al., 2018; Nelson, 2009).

To be anti-racist, educators must name White supremacy as the problem that creates health care disparities through teaching, inclusion in accreditation standards, and in professional dissemination of their work (Grenier et al., 2020; Hojjati et al., 2018). Educators should teach anti-racist actions occupational therapy students can take to decrease health disparities caused by racism and White supremacy such as increasing access to care, and supporting non-Western ways of knowing (Hojjati et al., 2018). Educators should intentionally include concepts of occupational justice from the perspective of BIPOC communities and communities from low and middle-income contexts (Simaan, 2020), and partner with BIPOC communities for content development (Zeldenryk & Yalmambirra, 2006). Occupational therapy educators are required to address standards within their own countries; however, it is important to draw on additional anti-racist content from other countries, particularly low and middle-income countries (Mahoney & Kiraly-Alvarez, 2019), and challenge the Western-focused curriculum and advocate for changes to national occupational therapy education standards (Hojjati et al., 2018).

### **Representation**

Education programs need to engage in actions to address the inadequate representation of BIPOC occupational therapy students and educators. Results of the review indicated many actions that educational programs can do to increase BIPOC student representation including faculty and student mentoring programs (Ford et al., 2021; Taff & Blash, 2017), occupational therapy program connections to national multicultural organizations (Ford et al., 2021), recruiting students from Minority Serving Institutions of Higher Education (Ford et al., 2021), and increasing access by reducing costs (Ford et al., 2021; Taff & Blash, 2017). Specific cost reductions could comprise of: reducing credit hours and length of degrees (Taff & Blash, 2017), creating scholarships, and graduate student assistantships (Ford et al., 2021; Taff & Blash, 2017). When making admissions decisions for students and hiring decisions for faculty, educators should consider the hidden curriculum (e.g., implicit cultural, academic, and social messages) that supports White supremacy in these decisions (Grenier et al., 2020), and actively work against upholding White supremacy by engaging in reflexivity on their actions (e.g., how departments exclude BIPOC students and faculty when they make choices based on who is a good “fit” with the department or program).

### **Educator Capacity Strengthening**

Given the breadth of areas across occupational therapy education presented above that require work to address anti-racism, educators need capacity strengthening for engaging in these anti-racist educational practices and actions. To support capacity building, occupational therapy programs can: use a tracking tool to monitor faculty implementing anti-racism considerations throughout the curriculum (Trentham et al., 2007), implement cultural awareness and unconscious bias training into professional development for educators (Ford et al., 2021), including addressing their relationship to colonization (Hojjati et al., 2018), and support educators to embed anti-racism work from outside the discipline of occupational therapy in the curriculum (AOTA, 2020b).

Decreasing racism requires it to be an openly discussed and reported topic. Racism reporting systems and classroom climate surveys can support evaluation of the effectiveness of anti-racism classroom culture actions and the continued presence of macroaggressions and implicit bias negatively impacting BIPOC students' learning (AOTA, 2020b; Taff & Blash, 2017).

### **Discussion**

This scoping study identified concrete anti-racist actions occupational therapy educators can take within the curriculum and university environments. Similar to findings from recent health science literature reviews (Coleman, 2020; Olcoñ et al., 2020), our study identified reflexivity and investigating what is missing within curriculum, intersectionality, naming the impact of White supremacy on professional education, and specific teaching strategies as key anti-racism actions. Unique to our study were strategies to increase BIPOC student and faculty representation by creating inclusive environments rather than adding token BIPOC representatives in hostile environments, decolonizing the curriculum by including non-Western knowledge and perspectives, and increasing educator capacity training to enact all these strategies. Anti-racism training specific to occupational therapy must contextualize how racism and colonialism impact the curriculum, profession, and people we serve. We note a scarcity of literature on conducting anti-racist assessments, research, and service learning. We also noted that many articles continued to use terminology such as cultural competency and diversity, rather than anti-racism and cultural humility. To focus the discussion on the lifelong nature of anti-racism work, and the inability for anyone to be truly "competent" in another person's culture requires a language shift. Table 4 provides recommendations for specific anti-racism actions occupational therapy educators can take based on the themes identified in this study.

**Table 4***Recommendations for Occupational Therapy Educator Actions by Theme\**

<b>Theme</b>	<b>Focus for actions</b>	<b>Specific actions educators can take</b>
Teaching strategies	<p>Connection to accreditation standards</p> <p>Student involvement in course design</p>	<ul style="list-style-type: none"> <li>Align anti-racism objectives with accreditation and institutional objectives to increase program and institutional support for anti-racism initiatives (Came &amp; Griffith, 2018)</li> <li>Include student representatives on curriculum committees</li> <li>Create a student advisory board</li> </ul>
Reflexivity	<p>Curriculum reflection</p> <p>Reflect on knowledge generation and value signaling in theories</p>	<ul style="list-style-type: none"> <li>Use guiding questions such as those within the Antiracist and Decolonized Teaching and Learning Framework (Twyman-Ghoshal &amp; Lacorazza, 2021) <ul style="list-style-type: none"> <li>How are you acknowledging and addressing the omissions within the field through your coursework and lectures?</li> <li>How are you working to ensure your course/curriculum is valuing a diversity of approaches and not privileging dominant forms of knowledge?</li> </ul> </li> <li>Include non-Western epistemologies (e.g., Ojibwe concepts of “Living the good life”) into teaching</li> </ul>
Decolonizing the curriculum	<p>Actively identify missing knowledge and perspectives</p> <p>Decolonize the broader university environment</p>	<ul style="list-style-type: none"> <li>Include non-Western perceptions of disability including the colonial legacy of those values (Grech, 2011)</li> <li>Highlight the important contributions of BIPOC occupational therapists in foundational courses</li> <li>Examine occupation when considering perception of valued activities by differing cultural groups</li> <li>Acknowledge the legacies of colonization and enslavement within their institutions such as, buildings and institutions named after slave holders or White supremacists, the colonial legacy of universities profiting from enslaved people, the forced removal of Indigenous Americans to establish land-grant institutions, and the racist uses of university mascots</li> </ul>

		<ul style="list-style-type: none"> <li>Promote land acknowledgement, changing the names of buildings and mascots, and teaching colonialism's impact on student and client populations</li> </ul>
Representation	<p>BIPOC students see themselves represented in the entire curriculum</p> <p>BIPOC stories from BIPOC perspectives</p> <p>Recruit, admit, retain, and support, historically underrepresented groups</p>	<ul style="list-style-type: none"> <li>Include in curriculum               <ul style="list-style-type: none"> <li>BIPOC authored articles, books, and course materials</li> <li>BIPOC guest lecturers</li> <li>Images of BIPOC in presentations</li> <li>Case-based learning of persons from non-Western backgrounds through strengths-based lenses, such as success stories, rather than predominately in a negative context</li> </ul> </li> <li>Include representation from differing communities to enable students to appreciate how BIPOC communities are not a monolith</li> <li>Invite paid BIPOC speakers to lectures and labs especially individuals that represent intersecting identities such as BIPOC speakers with disabilities, or BIPOC occupational therapists from the LGBTQI+ community</li> </ul> <p><b>Students</b></p> <ul style="list-style-type: none"> <li>Lower student degree costs by               <ul style="list-style-type: none"> <li>Using alternate program timelines (e.g., a 3+2 for obtaining undergraduate and master's degrees in occupational therapy)</li> <li>Advocating for reduced costs for specific populations (e.g., Michigan's tuition waiver for Native American students enrolled in public colleges and universities)</li> </ul> </li> <li>Actively recruit from historically Black colleges and universities, and universities that primarily serve underrepresented minorities (Merchant &amp; Omary, 2010)</li> <li>Work with BIPOC students at the high school and undergraduate levels to learn about the profession and provide the training and skills to apply to college programs (AOTA, 2021a)</li> <li>Create paths to admission that include</li> </ul>



		waving standardized assessments and guaranteed admission with completion of a perquisite undergraduate degree <ul style="list-style-type: none"> <li>• Provide faculty training on justice and anti-racism (AOTA, 2021a)</li> <li>• Create anti-racism program messages on public interfacing materials (AOTA, 2021a)</li> <li>• Facilitate mentoring from BIPOC faculty and upper year students during occupational therapy programs to decrease isolation from underrepresentation</li> </ul> <b>Faculty</b> <ul style="list-style-type: none"> <li>• Lower cost of doctoral degrees through scholarships, debt forgiveness programs, or tuition credits for taking fieldwork students from universities</li> <li>• Value BIPOC perspectives and expertise (Kelly et al., 2017)</li> <li>• Hire in cohorts or engage in cluster hiring (Kelly et al., 2017)</li> <li>• Create specific support and collective access to leadership (Kelly et al., 2017)</li> </ul>
Educator capacity building	Equip educators to discuss racism, bias, and health disparities  Implement and monitor anti-racist actions	<ul style="list-style-type: none"> <li>• Use external experts or train-the-trainer models</li> <li>• Emphasize the career-long nature of anti-racism learning and actions</li> <li>• Adopt evaluation tools for benchmarking and evaluating progress in anti-racist actions in teaching environments and curriculum from other health professions such as nursing and social work (Came &amp; Griffith, 2018)</li> </ul>
* This table addresses anti-racism actions identified in the occupational therapy education literature, and it does not include all anti-racism actions identified in other fields or practice areas		

Given the intersectionality of the clients that occupational therapists work with, occupational therapy educators need to include in their teaching, opportunities for students to learn to recognize the additive nature of discrimination based on intersecting identities (e.g., race, ethnicity, gender, class, sexuality, geography, age, disability, religion, etc.) and its impact on healthcare access and engagement in meaningful occupations. Addressing intersectionality supports holistic care by teaching students to comprehensively evaluate environments by examining the social, political, physical, and historical barriers that impact participation in occupations (Lucas & Washington, 2020).

Actions for recruiting, admitting, retaining, and supporting historically underrepresented groups of students to persist and graduate as occupational therapists were noted to be key. The AOTA Education Special Interest Section (AESIS) holistic admissions webinar is one recent resource that supports the importance of actions beyond diversity, equity, and inclusion including a paradigm shift to holistic education (AOTA, 2021a).

Recruitment of BIPOC occupational therapy faculty requires considerations of the historical impacts of racism on BIPOC populations and actions to mitigate those injustices. The number of BIPOC students graduating from United States academic institutions is low (Cataldi et al., 2018) and as occupational therapy programs in the United States move to doctoral entry-level, greater initiatives are required to ensure the opportunity gaps do not widen. Occupational therapy students are predominately White (Dawes, 2020), and systemic racism within employment and housing have created a wealth gap between Black and White families (Herring & Henderson, 2016). Thus, BIPOC occupational therapists may have more debt from their undergraduate and master's degrees and less ability or willingness to take on additional debt to complete doctoral degrees required for academia. Debt forgiveness programs, targeted scholarships, and other schemes to support affordability of doctoral degrees for BIPOC occupational therapists could increase faculty representation.

Occupational therapy educators acknowledge that being anti-racist is increasingly critical in the face of changing demographics and widening health disparities, but the field needs to do more work. Comprehensive training of educators and the identification and establishment of best teaching practices is imperative. Many occupational therapy educators have recently had some exposure to anti-racist training. However, it is not evident that these efforts have changed behavior or lead to more anti-racist education practices. Therefore, most occupational therapy educators would benefit from increased capability on the anti-racist actions identified in this review in conjunction with those within the breadth of current anti-racism resources for educators.

One reason for the lack of implementation is that occupational therapy educators' training may not prepare them to teach future professionals about the complex topics of racism, bias, and health disparities. Educators may be reluctant to teach about race issues and actively avoid these topics due to lack of adequate knowledge or training (Diffey & Mignone, 2017). As occupational therapy students and professionals who have incorporated anti-racism training into their practice go on to become the next generation of educators, this barrier may resolve. Until that time, programs can use, external experts, a train-the-trainer model, and university diversity, equity and inclusion teams. Providing adequate training equips educators with the knowledge, critical thinking skills, and confidence required to manage the classroom dynamics when engaging in challenging topics, such as race, with students.

In the United States, occupational therapy professional organizations provide important learning opportunities to educators. Recent examples include the AESIS webinar (AOTA, 2021a), the AOTA Diversity Equity and Inclusion Toolkit (AOTA, 2021b), and the Coalition of Occupational Therapy Advocates for Diversity (COTAD) sessions on

recruitment and retention of occupational therapy students and occupational therapy education program challenges related to racism (COTAD, 2021). Despite the increasing wealth of resources from the field and beyond, occupational therapy lacks support for implementing and monitoring anti-racist actions. Educators can use specific anti-racist actions from this scoping study to implement within their roles. To identify progress, accurate evaluations of curriculums and educational program policies and practices is crucial.

Given the complexity, there is no one right way to address anti-racism training. The nature of being anti-racist implies that training can never be complete; rather, it is a lifelong process. It is impossible for educators or students to become proficient after a single educational session or even a year of training, and individuals will absorb and apply information differently. Both educators and students must embrace this nuanced process as an essential aspect of their career development to improve equity and access within health care.

### **Limitations**

A scoping study methodology enabled inclusion of a range of methodological approaches; however, we prioritized published articles so anti-racist actions from the grey literature were not included. Furthermore, this review considered worldwide literature on anti-racism actions for occupational therapy educational programs to implement; however, only literature published in English was included, possibly omitting actions identified from countries where occupational therapy has strong social action roots, such as Brazil. Finally, a librarian, who may have been able to identify additional keywords, was not consulted when creating the search strategy.

### **Implications for Occupational Therapy Education**

To mitigate the impacts of racism, educators must engage in anti-racism actions identified in this scoping review, such as incorporating anti-racism teaching strategies and content, engaging in reflexivity, decolonizing the curriculum, and increasing BIPOC representation, and strengthening educator capacity actions within educational environments. Educators should embrace these actions as an ongoing responsibility for creating a more anti-racist and equitable educational environment and profession. Actions can be at course and departmental levels as well as at leadership levels including institutional policies, strategic planning and funding, and university culture.

With respect to future research that could advance anti-racist instructional practices for educators to employ in occupational therapy education, the current review points to several key actions. First, occupational therapy needs a “unified conceptualization of what constitutes anti-racism education including its purpose, essential components, and desired outcomes” (Olcoñ et al., 2020, p. 232), this step has also been identified as a priority in the social work field. Then building upon the established theoretical foundation, research that explores and identifies effective teaching strategies and curricula that promotes anti-racism practice in occupational therapy can be conducted.

## Conclusion

This scoping study provides concrete anti-racism actions for occupational therapy educational programs to implement. Considering the dearth of educational strategies identified, education specific to anti-racism seems to have not yet been embraced by occupational therapy but will likely proliferate given the recent shift in health education broadly. Incorporating anti-racist practices within occupational therapy in higher education must be an ongoing, intentional, and collaborative process that strives for institutional changes. This study serves as a foundation to create more anti-racist learning spaces and a more diverse profession that meets community needs.

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