doi: 10.7251/ZSAN2302023C **Review paper**

ROLE OF AN OCCUPATIONAL THERAPIST IN THE PROCESS OF INCLUSION*

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Abstract: *Inclusion is the process that destroys prejudice, allows reconstruction and taking the necessary steps for including everyone in all aspects of social life regardless of their differences. The focus is most often on the educational model, which is together with social and medical model associated with occupational therapy. The explanation of inclusion has theoretical foundations precisely in terms related to occupational therapy such as: universal design, daily life activities, disability, disablement, rehabilitation, functionality, barriers, participation, etc. At the same time, profession of occupational therapists in our circumstances is not sufficiently involved in the process of inclusion and this will be shown in this paper through a partial review of significant documents and legal regulations that affirm inclusion in Republic of Srpska and Bosnia and Herzegovina over the past twenty years. The aim of this article is to point out the importance of occupational therapists in the process of applying quality inclusion, whether it is an educational, social or medical model. Using a wide range of competencies of occupational therapists, it is necessary to affirm their future role in working with children and adults with special needs. Finally, we will provide concrete recommendations to address the current oversights in practice under our circumstances.*

Key words: *occupational therapist, inclusion, process, special needs*

Introduction

Inclusion received its legal foundation in Republic of Srpska and Bosnia and Herzegovina twenty years ago, with adoption of the document Framework Law on Primary and Secondary Education in Bosnia and Herzegovina [1]. The specified document launched a chain of actions that share a goal of improving the quality of lives of children with special needs in preschools, elementary schools and high schools. Over the past twenty years changes in legislation occurred with intention of allowing children with special needs to attend regular schools near their residence. A significant number of children is at the same time included in available daily centers that start to provide partial services in the rehabilitation domain, primarily speech therapy treatment, pedagogical and psychological support and various types of sport and art workshops. Parents of children with special needs become partners and they show an interest in the position of children in school and society. Importance is given to the medical model of inclusion and quality of service is adopted based on principles of International Classification of Functioning, Disability and Health (ICF) that was promoted with us in 2008 through EducAid [2]. Awareness is raised on the meaning

* Lectures by invitation

of timely observation and diagnosis with the aim of achieving maximum participation in activities of an individual in its immediate surroundings. Social model of inclusion is also being taken into account, and NGOs are the frontrunners that conduct the following activities: Children's Week, International Day of Persons with Disabilities, World Down Syndrome Day, World Autism Awareness Day, World Cerebral Palsy Day, World Sight Day, World Diabetes Day, and many more important events which include groups of people with disabilities. Following these manifestations and their media coverage, we can notice a form of humanitarian character in which, it seems, a focus is placed on requiring donations, thanking the donors, and a show that is under the patronage of various benefactors. Simultaneously, activities that enhance the quality of every-day functioning of children and adults with special needs in their surroundings don't have a sustainable character, but are mainly conducted within projects. Document National Human Development Report on Social Inclusion in Bosnia and Herzegovina quotes that people with disabilities are among the most endangered categories in this country. Regardless of the ratification of numerous documents and conventions a comprehensive multisector mechanism of their translation does not exist. A large number of public institutions are not available to people with disabilities [3]. Recommendations, measures, priorities and responsibilities are strongly marked, but guidelines proposed by UNDP are realized slowly in practice. Opening of numerous questions on the topic of inclusion often receive a response that the conditions are not fully matched, that inclusion is good only in theory but that significant deficiencies exist in practice. It is necessary to analyze social occurrences that lead to superficial attitude towards inclusive values.

The goal of this article is to point out the meaningful role of occupational therapists at affirmation and application of inclusion in our circumstances. Occupational therapists possess the theoretical knowledge and practical skills for providing support to people in state of special needs regardless of their age. As a part-time member they can bring useful practical guidelines to parents and staff in preschool and school institutions, prioritizing those that include children with special needs. Also, social institutions that have a larger number of users with special needs, and want to affirm inclusive values and participation of children and adults with disabilities need to recognize the occupational therapist as an important team member. Oversight that excludes an occupational therapist can leave permanent consequences on the lack of intervention towards the client and the general cultural concept that makes it difficult for the environment to understand and accept the possibilities of people with special needs.

Current legal framework of inclusion

In our recent past a series of legal documents were published, which encourage inclusion in the sense of including children with special needs in regular schools and people with disabilities in the social community. Practical circumstances that have included segregation education and social exclusion is necessary to reorganize and adapt to new legal provisions. Inclusion is understood formally in our country and has a temporary character, most often as facets in different projects that become very hard to sustain. Conditions of raising the quality of services that are

necessary to different vulnerable groups are necessary to constantly improve [4]. Some of the questions that are narrowly tied to inclusion such as the universal design should be placed into function for the well-being of the entire population. Centre for Excellence in Universal Design states that the Universal Design is the design and composition of an environment so that it can be accessed, understood and used to the greatest extent possible by all people regardless of their age, size, ability or disability. It is necessary to convince all possible users that the universal design is accessible and adaptable to every person. Environment factor is a special component of The International Classification of Functioning Disability and Health and considers the occupational therapists the provider of support among healthcare workers. Consequently, occupational therapists need to become a member of team in healthcare, social and educational institutions that offer support to people with special needs.

It seems that the fundamental lack of support to students, teachers and professional associates in preschool and school institutions is an evident deficiency of professional team adequacy in relation to the needs of users. Support teams don't have the practice of external associates that are able to help in the sense of specialized intervention. The law of fundamental upbringing and education from 2017 states that a flexible program, prepared teachers and professional support in order to develop the key student competencies, tolerance, accepting and social inclusion [6]. However, there are evident limited interests in practice that are displayed in situations that include children that have been hospitalized for a longer period of time, children that are psychiatric patients, patients with chronic diseases, children with rare diseases and also those children that are at home and their parents don't have the caregiver status. In those situations the role of occupational therapist would be significant for students in regular and special schools.

The last published Law on Basic Upbringing and Education in Republic of Srpska (2022) gives some new guidelines towards improving the position of children with development issues. Article 100 in the Law of Basic Education in Republic of Srpska from 2022 states an array of activities that can be supported by occupational therapists, such as training courses for the use of assistive technologies in education [7]. It is known that the course for assistive technologies is in great expansion and that they are being applied by trained occupational therapists.

Document that is aligned with the Law of Upbringing and Education is the Curriculum for children with special needs that has been updated in 2021 and is being applied in regular and special schools. In the document additional activities are stated, which should be provided by available professional staff and which include: re-education of psychomotor skills, assessment technologies and sensory-integrative exercises that are in the competence domain of a working therapist, who can be additionally educated in the areas specified. The curriculum for education of students with moderate or severe impairment of intellectual functioning also recommends, in addition to the basic activities, more stimulative activities such as: art therapy, music therapy, Floortime approach, Early Start Denver Model – with emphasis on developing playfulness, symbolic functions, social interactions, pragmatic

competencies, but also on organizing clear structure and routine [8]. Simultaneously, our educational institutions don't have a license to conduct these programs in practice, they still don't have therapists that can apply that in their job description. Modern circumstances affirm an array of additional education and competences that occupational therapists can acquire after receiving their bachelor's degree. Some of them: Psychomotor rehabilitation, DIR Floortime approach, Montessori Education, Music Therapy, Play Therapy, Art Therapy, SI Therapy, are available in Bosnia and Herzegovina, it's neighbor countries or via online education. We still don't have an available database about the number of educated occupational therapists in the specified fields. There exists a tendency to provide these services within the framework of game rooms, consulting offices in the private practice domain, citizen associations and NGOs. This is where cooperation with the teacher, the school's professional team is lost, as well as the setting of joint short-term and long-term goals that are in the child's interest. The role of the curriculum in the education of children with special needs must be included in research [9].

The Law on Social Protection of Republic of Srpska uses the term "working – occupational" therapy and recognizes occupational therapists as team members. This document defines the following services: Daycare (Article 51.1); Home for children and young people with developmental disabilities (Article 109.1); Home for the elderly (Article 111.1); Center for day care of adults (Article 114.2); Center for social rehabilitation of people with disabilities (Article 118.2); Center for children and youth with developmental disabilities (Article 120.2) [10]. The phrase "work - occupational therapy" and "working occupation" implies the misunderstanding of lawmakers that they are the same term and the occupation that in Serbian language has a singular meaning in the sense of competencies.

Social protection institution Home for children and youth with developmental disabilities (Article 109.1) states that to children that have issues in physical, mental or sensory development are provided with, among other things, recreational, cultural and entertainment activities, work occupational therapy and, in accordance with their abilities, type and degree of disability, assistance in education and training. At the same time, The Social Welfare Institution for Day Care recognizes occupational therapists. Article 114.2 states that users are provided with services such as: day care, nutrition, health supervision, work and occupational therapy, cultural-entertainment and recreational activities and other activities according to the abilities and preferences of the users. We must note that it is a great progress that occupational therapy is recognized as an important form of support in the legal framework in the field of social protection. However, practical circumstances do not identify that professionals from the domain of occupational therapy are in the intended workplaces. This needs to be covered in the future research.

Available publication that was published in 2019 by UNICEF entitled: Analysis of Existing Regulations and Practices in the Assessment and Referral of Children with Disabilities covers the territory of ten cantons of the Federation of Bosnia and Herzegovina. An example of good practice in the Una-Sana canton is highlighted here, where there are Centers for the Development of Inclusive Practices in Cazin and

Bihać, where occupational therapists are part of the professional team. This project is currently being implemented under auspices of the Ministry of Education, Science, Culture and Sports and the international organization Save the Children [11]. It is necessary through partnership between different public institutions and international organizations to affirm examples of good practice and the provision of services in the field of occupational therapy to clients in all periods of life.

Theoretical approaches to occupational therapy and inclusion in our country

Occupational therapy in Bosnia and Herzegovina is developing parallel to the development of hospitals and rehabilitation institutes, and this trend has been going on for more than seventy years. The publication published in 1972 on the occasion of the 20th anniversary of the Institute for Physical Medicine and Rehabilitation "Dr. Miroslav Zotović" states that "work therapy" in the rehabilitation of the disabled is gaining more and more importance. It is indicated that, through occupational therapy, muscle strength, joint mobility, movement coordination and correct body posture are restored or strengthened. An increase in work endurance and a strengthening of work capacity were also identified. Also, the therapy has a positive psychological effect on the psychomotor activity of patients, enhances emotional stability, strengthens the sense of sociability, increases self-esteem, develops interest in work and play. In the course of occupational therapy, information is obtained about the patient's reaction to the environment, about his attitude towards work, interests, abilities and inclinations for future occupations [12].

The period of the beginning of occupational therapy in our country follows the trend of job training for the disabled, and some of them manage to find employment in factories, companies, craft shops and administrations. It is evident that social development and economic policy influenced this trend, which changed in the 1990s due to the war in Bosnia and Herzegovina. Social isolation, the impossibility of employment and all the negative phenomena that followed the period after the war had a long-term impact on the life of the disabled. In 2021, the Institution of the Ombudsman for Human Rights issued a Special Report on the effectiveness of legal solutions on professional rehabilitation and employment of people with disabilities in Bosnia and Herzegovina. This document reports on many complaints about the violation of the rights of people with disabilities in the territory of Bosnia and Herzegovina. It is stated that for the purpose of professional rehabilitation, it is necessary to encourage the work of day centers where people with intellectual disabilities should have work-occupational workshops that contribute to the preservation of remaining abilities, such as occupational therapy. The lack of qualified staff specially trained to work with people with disabilities is also highlighted [13]. These facts point to the need to affirm the profession of occupational therapist, and to educate unverified staff who have many years of experience in working with the disable and acquire the necessary competencies and skills in occupational therapy through academic education.

An international document that is part of the Council of Occupational Therapists for European Countries (COTEC) also identifies the lack of a profession of occupational therapists in Bosnia and Herzegovina. Their report entitled: Summary of Occupational Therapy Profession in Europe 2022, states that in Bosnia and Herzegovina the number of practicing OT's per 100,000 head of population is 1,35 [14]. These statistics give very low numbers compared to other European countries, which indicates the presence of improvisation when it comes to services for people who are in the need of occupational therapy. It is necessary to take into consideration the positive experiences of the involvement of children with special needs in various treatments carried out by occupational therapists. Kostelnik and colleagues cite examples of children with special needs who have occupational therapy since the age of two, as well as the positive effects of treatment in which there is team cooperation among different professions that provide education and rehabilitation to this sensitive category [15]. Republic of Srpska has four special schools attended by children with special needs of primary and secondary school age. In the mentioned schools, there is no designated position for an occupational therapist. The same schools have sensory rooms in which the method of sensory integration is applied, which was founded by occupational therapist Anna Jean Ayers in the 1960s [16]. All students who attend special schools passed the standardized Barthel Index assessment, which is the basic assessment instrument used by occupational therapists worldwide. In special schools, health nurses are present as providers of support to children with special needs, and it is expected that occupational therapists will also become professional associates of these schools.

Qualitative and quantitative monitoring of inclusion in regular schools in Bosnia and Herzegovina indicates the presence of a large number of children with special needs, but occupational therapists are still not recognized as experts who provides support to children with special needs [17]. This document does not recognize the profession of occupational therapists in professional teams of regular schools. For now, the only experience regular schools have with occupational therapists is that they are sporadically present as teaching assistants and support providers for children with special needs, during the school year.

In the field of higher education, positive developments related to personnel education are evident. On January 30, 2014, the Ministry of Education and Culture of the Republic of Srpska issued a Decision introducing the first study program of occupational therapy in Bosnia and Herzegovina and the Republic of Srpska. The aforementioned Decision confirms that the College of Health Sciences Prijedor meets the requirements for the first cycle of the study program occupational Therapy – 240 ECTS points from the academic year 2014/2015. With the conclusion of summer semester of the 2022/2023 school year, there has been a total number of 90 students who graduated from the study program of occupational therapy at the College of Health Sciences Prijedor. During 2015, a new Rulebook on acquired professional, academic and scientific knowledge was adopted, which for the first time mentions the title of graduated occupational therapist – 180 ECTS and graduate occupational therapist – 240 ECTS in the list of occupations [18]. The only accredited study program in occupational therapy is realized at the Public Institution College of Health

Sciences Prijedor. There are also some private faculties where they are educated alongside the field of physiotherapy.

Occupational therapists in Republic of Srpska are predominantly employed at the Institute for Physical Medicine and Rehabilitation "Dr. Miroslav Zotović" and in smaller numbers at the Mental Health Centers.

Conclusion

By reviewing the legal regulations, documents that promote inclusion and by looking at the literature that mentions the significant role of occupational therapists, we note that inclusion in our country is still in its infancy and is not based on the principles of expertise, competence and individual approach of a wide range of experts. Occupational therapists, who are represented in Bosnia and Herzegovina and Republic of Srpska in small numbers, primarily in the health system, should have a significant place in the professional teams. Analyzing our practical circumstances, it is evident that occupational therapists do not have the deserved role in educational institutions and the opportunity to apply their skills in working with children with special needs. The curriculum and program for regular and special schools state modern therapeutic models, but they are still only prescribed in documents, while practical circumstances only partially provide this type of service to children with special needs. Continuous education of occupational therapists in terms of conducting simulating treatments with children with special needs as well as with adults with sensory and cognitive impairments is necessary. In institutes and rehabilitation centers they are recognized as competent experts, and it would be necessary to include them in the associates of all institutions that implement inclusion.

Occupational therapists are experts who can support the children with special needs in regular schools in such a way that they will identify the real needs of students and apply adequate tools and intervention. A team approach is extremely important for quality educational inclusion. Due to the wide range of additional education that these experts can complete in the field of therapy and rehabilitation, it is necessary to give them the opportunity to apply the same with those who are in a state of need for intervention. Inclusion implies fully including people with special needs in the activities of everyday life as well as professional achievement. This is exactly why the role of occupational therapist is very important because this occupation includes people with special needs during all periods of life.

References

[1] Okvirni zakon o osnovnom i srednjem obrazovanju u Bosni i Hercegovini. Službeni glasnik BiH. br.18 (01. 07. 2003).

[2] Svjetska Zdravsatvena Organizacija (2008*). Međunarodna klasifikacija funkcionisanja, onesposobljenja i zdravlja (MKF).* Pesaro-Italy: EducAid, (str. 188-205).

[3] Swiss Agency for Development and Cooperation (SDC) & United Nations Development Programme (UNDP). *Social Inclusion in Bosnia and Herzegovina 2020 National Human Development Report.* Extended Summary. Sarajevo: UNDP; 2021. p. 17-19.

[4] Čolić T. (2008). Smisao i sadržaj inkluzivnog obrazovanja u savremenim uslovima kod nas. Banja Luka: Art print (str. 36-37).

[5] Centre for Excellence in Universal Design. National Disability Authority (NDA). Available from: http://universaldesign.ie/What-is-Universal-Design/ [cited 2023 June 16].

[6] Zakon o osnovnom vaspitanju i obrazovanju. Službeni glasnik Republike Srpske br. 44 od 12.05. 2017; (str. 2).

[7] Zakon o osnovnom vaspitanju i obrazovanju. Službeni glasnik Republike Srpske br. 81 od 25.08. 2022; (str.5;16-17).

[8] Republički pedagoški zavod Republike Srpske. Nastavni plan i program za vaspitanje i obrazovanje učenika sa umjerenim i težim oštećenjem intelektualnog funkcionisanja (2021) [cited 2023 April 29]; p.11. Available from: https://www.rpz-rs.org/sajt/doc/file/web_portal/05/5.5/Nivoi/NPP_UTOIF_I_II_III_nivo.pdf

[9] Čolić T. Vršnjačka podrška djeci sa posebnim potrebama. Prijedor: Visoka medicinska škola Prijedor & Banja Luka: Art print 2022; str. 65-72.

[10] Zakon o socijalnoj zaštiti. Službeni glasnik Republike Srpske br. 37 od 27. 04. 2012. (str. 13 -21).

[11] Analiza postojećih propisa i praksi kod procjene i upućivanja djece s teškoćama u 10 kantona Federacije Bosne i Hercegovine; (Kobetić D.- autor analize); UNICEF Bosna i Hercegovina; 2019; str. 25 i 88.

[12] Marković M, Smailagić I, Maglajlić O, Stevanović B, Simić A i Firkić F. (1972). 20 godina Zavoda za rehabilitaciju Dr Miroslav Zotović – Banja Luka. Zagreb: Ognjen Prica str. 41.

[13] Institucija ombudsmana Bosne i Hercegovine (2021). Specijalni izvještaj o efikasnosti zakonskih rješenja o profesionalnoj rehabilitaciji i zapošljavanju osoba sa invaliditetom u Bosni i Hercegovini. str. 74-81.

[14] Council of Occupational Therapists for the European Countries (COTEC). Summary of Occupational Therapy Profession in Europe 2022; [cited 2023 June 14]; p.5 (1.4) Available from: https://www.coteceurope.eu/wp-content/uploads/2023/06/Summary-of-the-Profession-2023.pdf

[15] Kostelnik MJ, Onaga E, Rohde B, Whiren A. Dijete sa posebnim potrebama: priručnik za odgajatelje, učitelje i roditelje. Zagreb: Ebuca; 2004. p. 123-126.

[16] Bartolac A. Procjena okupacija u radnoj terapiji. Zagreb: Zdravstveno veleučilište. 2016; str. 93.

[17] EducAid (2009). Kvalitativni i kvantitativni monitoring inkluzije u osnovnim školama Bisne i Hercegovine. Pesaro-Italy: EducAid

[18] Pravilnik o izmjeni pravilnika o listi stečenih stručnih, akademskih i naučnih zvanja. Službeni glasnik Republike Srpske br. 83 od 09.10. 2015; (str. 15).

ULOGA RADNOG TERAPEUTA U PROCESU INKLUZIJE

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Sažetak: *Inkluzija je proces koji ruši predrasude, dozvoljava restruktuiranje i poduzimanje neophodnih koraka da svi budu uključeni u sve segmente društvenog života bez obzira na različitosti. Fokus je najčešće na obrazovnom modelu, koji se zajedno sa socijalnim i medicinskim modelom, dovodi u vezu sa radnom terapijom. Objašnjenje inkluzije ima teorijske osnove upravo u terminima koji su srodni radnoj terapiji kao što su: univerzalni dizajn, aktivnosti svakodnevnog života, invalidnost, onesposobljenost, rehabilitacija, funkcionalnost, barijere, učešće itd. Istovremeno, struka radnih terapeuta u našim okolnostima nije dovoljno uključena u inkluzivni proces i u ovom radu će se pokazati djelimičnim pregledom značajnih dokumenata i zakonskih regulativa koji proteklih dvadeset godina afirmišu inkluziju u Republici Srpskoj i Bosni i Hercegovini. Cilj ovog članka je da ukaže na značaj radnih terapeuta u procesu primjene kvalitetne inkluzije bilo da se radi o obrazovnom, socijalnom ili medicinskom modelu. Koristeći širok spektar kompetencija radnih terapeuta neophodno je afirmisati njihovu buduću ulogu u radu sa djecom i odraslim osobama sa posebnim potrebama. U završnom dijelu, biće navedene konkretne preporuke koje mogu doprinijeti prevazilaženju evidentnih propusta u trenutnoj praksi pri našim okolnostima.*

Ključne riječi: *radni terapeut, inkluzija, proces, posebne potrebe*