


Review Article

Occupational therapy and rural environment: a scoping review

Terapia ocupacional e meio rural: uma revisão de escopo

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Abstract

The rural world is a territory of extreme importance for society as a whole; nevertheless, it still tends to be seen as something separate from it and often marginalized in relation to the urban environment. In addition, it is seen as a backward, outdated and rustic space in some contexts, such as the Brazilian one. The lack of access to social goods ends up limiting the perspectives of people living in this territory, reducing their autonomy and opportunity to make choices about their own lives. Both worldwide and nationally, occupational therapy, in its different subareas, has sought to contribute to the resolution of problems involving different contexts and subjects who occupy and live in rural areas. Thus, the primary objective of this study was to carry out a scope review that covered national and foreign publications, seeking to apprehend, systematize and disseminate scientific production in the interface of occupational therapy with the rural world, critically analyzing it, in order to perceive its potential and weaknesses, considering the different ruralities and contexts around the world. Results from five continents were found with data necessary for this systematization and for a synthesis of this production. Such results were studied, analyzed and distributed in six categories configured from the specific subjects addressed. It is concluded that relevant studies were carried out in the occupational therapy-rural world interface, focusing on factors that influence professional performance in these territories, while proposing methods, strategies and practice, and training programs to overcome important challenges.

Keywords: Occupational Therapy, Rural Areas, Rurality, State of the Art Review.

Resumo

O mundo rural é um território de extrema importância para a sociedade como um todo; não obstante, tende ainda a ser visto como algo separado desta e, muitas vezes marginalizado em relação ao meio urbano. Além disso, é tido como um espaço atrasado, desatualizado e rústico em alguns contextos, como no brasileiro. A falta de acesso a bens sociais acaba por limitar as perspectivas da pessoa que vive nesse território, diminuindo sua

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autonomia e oportunidade de escolhas com relação à sua própria vida. Tanto no âmbito mundial quanto nacional, a terapia ocupacional, em suas diferentes subáreas, tem buscado contribuir para a resolução de problemáticas que envolvem contextos e sujeitos diversos que ocupam e vivem no meio rural. Assim, o objetivo primário deste estudo foi realizar uma revisão de escopo que abrangesse publicações nacionais e estrangeiras, procurando apreender, sistematizar e divulgar a produção científica na interface da terapia ocupacional com o mundo rural, analisando-a criticamente, de modo a perceber suas potencialidades e fragilidades, considerando as diversas ruralidades e contextos mundo afora. Foram encontrados resultados dos cinco continentes com dados necessários para essa sistematização e para uma síntese dessa produção. Tais resultados foram estudados, analisados e distribuídos em seis categorias configuradas a partir dos assuntos específicos abordados. Conclui-se que estudos relevantes foram realizados na interface terapia ocupacional-mundo rural, voltando-se a fatores que influenciam a atuação profissional nesses territórios, ao mesmo tempo em que propõem métodos, estratégias e programas de prática e formação para superar importantes desafios.

Palavras-chave: Terapia Ocupacional, Espaço Rural, Ruralidade, Revisão do Estado da Arte.

Introduction

The rural world is understood as a sociocultural territory integrated into society as whole, in dynamic interaction with the urban environment and diverse contexts of the contemporary world in a field continuum - the city (Wanderley, 2001). The rural world is present in a double space. The first, a physical space with its own characteristics built from the historical process of occupation of the field, developing social dynamics of domination, based on the logic of possession and use of natural resources, such as land and water. The second, the space of everyday life, in which life is lived with its singularities and identity characteristics (Wanderley, 2001).

Thus, the rural territory presents contexts, histories and meanings of extreme importance for society as a whole. However, it is still seen as something separate from society and, at the same time, marginalized in relation to the urban environment (Wanderley, 2001).

In the Brazilian context, it is often seen as a backward, outdated and rustic space in relation to the environment with the greatest population agglomeration and holder of the greatest number of education, culture and health equipment - the urban environment. The more rarefied population density in the countryside and the lack of access to the aforementioned means are factors that influence the marginalization of the "rural world". The "city, with its centralizing and concentrating functions, would be the repository of public power and distributor of public and private services, aimed at all citizens, rural and urban" (Wanderley, 1997, p. 3). The concentration of resources and judicial bodies in the urban center totally influences rural autonomy as singular means, as it makes it hostage to the condition legally imposed by the former, which accentuates the inequality between these means, since the latter is included as an extension of the first, not as a place with its own demands and that requires common services, but also some specific ones. This is also aggravated by the location of the main public and private services in the cities, which worsens the condition of living in rural areas, with social disadvantages conditioned precisely by the lack of access (Wanderley, 1997).

In this sense, this space historically suffers from a process of marginalization in relation to the urban, not only because of its cultural dominance, but also because of the lack of public policies and the conflicts that involve the land concentration that characterizes the rural world in Brazil since the colonial period. The lack of access to social goods, even if it were possible to overlook land ownership, resources and equipment, ends up limiting the perspectives of the people who live there, conforming them to cultural roles constructed based on the historical process of marginalization, which reduces their autonomy and opportunities for choices regarding their own lives (Wanderley, 2001).

Both at the global and national levels, we know of several works in the area of occupational therapy, in the search to contribute to the resolution of problems that involve contexts and subjects that occupy and live in this territory (Regan, 1982; Farias et al., 2019).

The process of marginalization of the countryside, or the rural world, is reflected not only in the daily lives of the people who live there, but also in what many professionals turn to, whether in terms of training or their contribution to specific techniques, in which, among them, are occupational therapists (Regan, 1982; Wills & Case-Smith, 1996).

The therapeutic-occupational practice in rural areas can be characterized in several ways. It can be of a community nature, such as experiences in rural schools, in general of a common nature, as described by Wills & Case-Smith (1996), which adapts according to the demand, age and context of people and communities, punctuating that there is a need for respect and appreciation of the rural territory, with a view to equity in relation to the urban population and access to education, culture, among other social goods (Regan, 1982; Wills & Case-Smith, 1996).

Regan (1982) and Johnson et al. (2003), in research in the US rural context, demonstrate the differences in various occupational spheres between the rural and urban areas, considering the lack of investment in infrastructure by the State in relation to the rural environment. As a result of this, for example, the teaching deficit in rural schools in the 1980s was alarming when compared to that in urban areas. It is pointed out that the action of occupational therapy in the school field could help to minimize this deficit, proposing an integration of community and political resources in favor of guaranteeing an education system adequate to the demands of the context. However, it is pointed out that the rural occupational therapist could come into conflict with occupational therapists from other subareas due to their lack of knowledge of the singularities required for intervention in rural areas (Regan, 1982).

Johnson et al. (2003), in a study with occupational therapists who work in rural areas of the United States, with the objective of tracing the characteristics of these professionals in general, show that they bring three main components to their professional practices: a) general knowledge of the subareas of performance and, at the same time, mastery in any of them since there was not yet a number of studies focused on the profession in the rural context, which made this specialization in some line of knowledge difficult or even impossible; b) the professional's need for adaptability to the environment in which they worked; and c) dealing with a wide and diverse list of demands to be met. As for the environment, these authors characterized it as communities with few political and material resources and, as a

result, pointed out that a restructuring of these communities was necessary in order to improve such conditions. However, according to the authors, the professionals who participated in the research stated that the interaction between the community and the professional was constant and close due to the adaptation of the occupational therapist to their work and to the community.

In Australia, the lack of public investment in the health sector in rural territories was seen as a hindrance to therapeutic-occupational practice (Millsteed, 2000; McAuliffe & Barnett, 2009). However, in addition to public authorities, isolation and distancing from other professionals would also cause problems of various natures for the practice of occupational therapists in rural areas. The unequal distribution of professionals would influence not only people's access to occupational therapy services, as well as the training of these professionals, in view of the distance from institutions that offer occupational therapy courses in rural areas and the deficit of theoretical and methodological references in this area. One proposal to address this problem was the rural education movement as a way to minimize rural-urban disadvantage in Australia. The strategies of this movement included promoting the approximation of the university as a whole, and also the area of occupational therapy to the issue of rurality, in an attempt to improve the perception of occupational therapy students about the rural environment and to increase the number of future professionals who might be interested in working with this theme (Millsteed, 2000; McAuliffe & Barnett, 2009).

In Brazil, Farias et al. (2019) discuss the intervention of social occupational therapy in schools in rural areas in the process of democratization of public schools in this territory, focusing on the needs of young people, since this population suffers social exclusion due to the historical disadvantages of access to various services and rights, including permanence in school education. These authors propose that the occupational therapists put themselves in a position that contributes to the recognition of the needs and potentialities in different spheres of life and interests of rural young people, in micro and macro social spheres, dealing with the stereotype of the countryside and of those who live in it as residual and delayed.

Based on these studies, it is clear that occupational therapy in rural areas has been worked on and/or guided both in Brazil and in some other countries. Such works make us observe the potential to explore this subject, as they bring a way of understanding, problematizing, substantiating and disseminating the therapeutic-occupational practice, but, at the same time, outline a field of knowledge that is not widespread, under construction, in development. Thus, it was decided to carry out a scope review with the objective of synthesizing knowledge in order to map concepts, evidence and gaps in academic productions related to occupational therapy and the rural world, in a systematic and selective way (Arksey & O'Malley, 2005; Colquhoun et al., 2014), with a view to adding elements to collaborate with the qualification of specific interventions in the area in territories, contexts and with subjects from the rural world and, finally, albeit indirectly, to incorporate this theme to the content of disciplines that should compose the initial professional training in occupational therapy.

Methodology

A scope review was carried out, since this type of study makes it possible to systematize and map the main sources, subjects and concepts referring to a certain area (Mays et al., 2001). Like Levac et al. (2010) systematized, firstly, the research question was elaborated (Arksey & O'Malley, 2005; Levac et al., 2010), namely: "What was produced about the interface of occupational therapy with the rural world?". With this theme, a search was carried out in the academic databases *Web of Science* and *Scopus* and in the *SciELO* electronic library, in order to survey relevant studies up to the year 2020. With the help of the Excel® tool, a spreadsheet was created for the review of possibly duplicated texts. Then, using the Mendeley® tool, the titles and abstracts of the studies were read for the initial inclusion of those that addressed the interface of occupational therapy with the rural environment, which, in the next step, were read fully. With this reading, the texts that related occupational therapy with the rural environment or with its populations from the perspective of the area were gathered. Finally, the studies actually included according to the established criteria were grouped, analyzed, mapped and categorized according to the subject(s) specifically addressed(s), authors, journals, places and years of publication, using the aforementioned tools.

In order to better qualify the searches to be carried out, a consultation was carried out with a librarian, an employee of the Community Library of the Federal University of São Carlos, in order to assemble a search key that covered the largest possible number of studies. Thus, the descriptors used in the searches were: "occupational therapy", "occupational therapist", "rural population", "rural community", "rural area", "rural health", "rural health service" and "rural health center".

For data systematization, the aforementioned tools were used and, in a complementary way, The Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA), extension for scoping reviews (PRISMA-ScR) (Moher et al., 2009; Tricco et al., 2018) and the Canva® tool was also used.

Results

A total of 582 studies were found from the searches. The spreadsheet created allowed the systematization of the works according to title, authors, year of publication and journal in which it was published. Thus, 86 (14.8%) works were excluded because they were duplicated. Next, the titles and abstracts of the remaining 496 papers were read. Of these, 363 (73.1%) were eliminated because they did not, in fact, address some interface between occupational therapy and the rural environment and one was excluded (0.2%) because it could not be accessed; thus, 132 studies were included, being 126 (25.4%) for articulating the themes "occupational therapy" and "rural world" in the texts of their abstracts and 6 others excluded (1.2%), because the reading of their abstracts did not provide sufficient evidence on whether or not they met the established inclusion criteria, so that their reading in full could provide this evidence. In the next step, with the complete reading of the remaining 132 texts, 49 (37.1%) were excluded because they did not meet the criteria and 9 were also excluded (6.8%) because it was not possible to access their full version. Thus, 74 (56.1%) studies were included in this review and classified according to the topics covered, as shown in Figure 1 below:

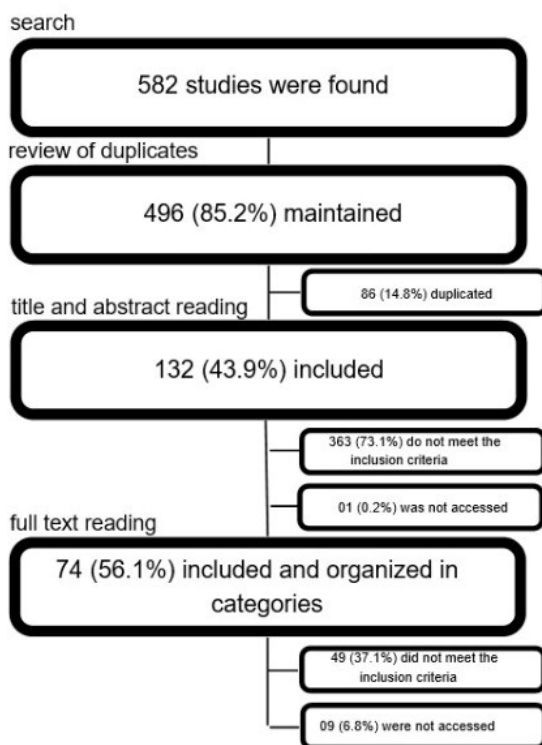


Figure 1. Stages of data systematization.

Therefore, of the 582 studies initially found, 74 (12.7%) were maintained and categorized, the oldest of which was published in 1982 and the latest in 2020, as shown in Figure 2:

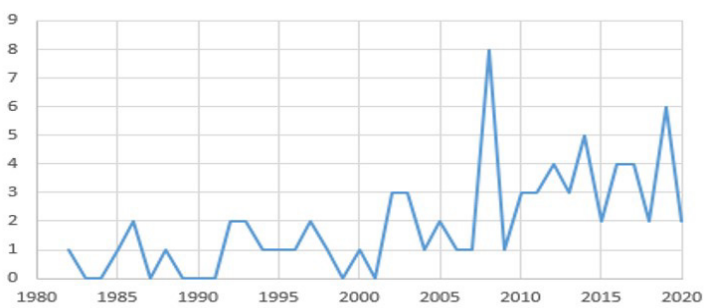


Figure 2. Distribution of articles over the years. Sources: *Web of Science, Scopus e SciELO* (2020).

These 74 texts were fully re-read and their analysis allowed them to be distributed in the following axes created: 29 (39.2%) in *Perspectives and perceptions of occupational therapists on practice in rural areas*; 25 (33.8%) on *Work methodologies in rural areas*; 10 (13.5%) in *Study of a population with therapeutic-occupational bias*; 6 (8.1%) on *Impacts of a practice on a population*; 3 (4%) in *Searching for an efficient education*; and 1 (1.3%) did not fit in any of these axes, as shown in Table 1.

Table 1. Distribution of selected studies into categories.

Quantity	%	Axes
29	39.2	Perspectives and perceptions of occupational therapists on practice in rural areas
25	33.8	Work methodologies in rural areas
10	13.5	Study of population with a therapeutic-occupational bias
6	8.1	Impacts of a practice on a population
3	4.0	In search of an efficient education
1	1.3	Unclassified

Sources: *Web of Science* (2020), *Scopus* (2020) e *SciELO* (2020).

The axis referring to the perspectives and perceptions of occupational therapists about the practice in rural areas gathers data about this practice based on the reports of occupational therapists and students in the area. Work methodologies in rural areas present, discuss and expatiate demands, strategies, methods and programs aimed at serving different populations. Studies of populations with a therapeutic-occupational bias, on the other hand, focus on the spheres of actions and occupations of specific populations residing in rural areas, relating them to the theoretical bases of studies on rural areas. The axis referring to the impacts of a practice on the population presents data that express the consequences and validation of practices by occupational therapists who used specific resources and methods to meet the demands of rural populations. As for the axis “In search of an efficient education”, the proposal was to gather strategies used by occupational therapists and the academic environment in the area to maintain and/or transform evidence-based practice using educational processes. Finally, the article not classified in any of these axes focuses on a faster and more efficient means of transport for occupational therapists to travel long distances in rural areas.

A total of 177 authors and co-authors published studies on occupational therapy in the interface with the rural world, with 160 (90%) having published it only once and 17 (10%) having published it two or more times. They were affiliated with institutions located on five continents, with 175 linked to institutions in a single country and two linked to institutions in different countries, with emphasis on this distribution for Oceania (n=73), with all authors and co-authors linked to institutions in Australia, as shown in Table 2.

Table 2. Number of authors, co-authors, and their institutions by country and continent.

Continent	Country	Number of authors and co-authors
Oceania	Australia	73
Americas	Canada	20
	USA	36
	Brazil	2
Africa	South Africa	31
Europe	Denmark	1
	England	1
	Spain	5
	Sweden	5
Asia	India	1
	China	3
	Unidentified	1

Sources: *Web of Science*, *Scopus* e *SciELO* (2020).

The studies were distributed in 29 journals, of which 19 (65.5%) published one study and 10 (34.5%) published two or more (Table 3). The journal with the

highest number of publications was the Australian Occupational Therapy Journal (n=18).

Table 3. Journals that published two or more studies.

Journal	Number of publications
<i>Australian Occupational Therapy Journal</i>	18
<i>Australian Journal of Rural Health</i>	7
<i>South African Journal of Occupational Therapy</i>	6
<i>American Journal of Occupational Therapy</i>	5
<i>Occupational Therapy in Health Care</i>	5
<i>Occupational Therapy International</i>	4
<i>Rural and Remote Health</i>	4
<i>African Journal of Disability (Online)</i>	2
<i>Canadian Journal of Occupational Therapy</i>	2
<i>The Australian Journal of Rural Health</i>	2

Sources: *Web of Science, Scopus e SciELO* (2020).

Discussion

Rural contexts around the world can be very different, so professional practice in occupational therapy can gain specific characteristics according to where it takes place. However, the lack of professionals, the challenges of long distances and isolation are common aspects (Quintyn, 1986; Kenkre, 1994; Stagnitti, 2008). The lack of occupational therapists working in rural areas is well documented in several studies (Millsteed, 2000; Peterson et al., 2003; Lannin & Longland, 2003; Bateman, 2012; Merrit et al., 2013). In the same clipping, professionals and undergraduate students report that this isolation from other professionals in the area demands some specific skills (Polatajko & Quintyn, 1986; Markewitz, 1992; Daly et al., 1997; Mills & Millsteed, 2002; Lee & Mackenzie, 2003; Steenbergen & Mackenzie, 2004; Devine, 2006; McAuliffe & Barnett, 2009; Wielandt & Taylor, 2010; McAuliffe & Barnett, 2010; Van Rensburg & Toit, 2016; Naidoo et al., 2017b), also punctuating the need for a generalist professional reasoning and continuing professional training aimed at the demands of various natures in the rural environment, which leads to the description of these professionals as “general specialists” (Mills & Millsteed, 2002).

Populations residing in rural areas, in turn, may suffer a process of rupture in their daily lives, whether due to accidents, social marginalization or isolation (Crouch, 2008; Kingston et al., 2010; Parsons & Stanley, 2008; Prieto-Bueno & Cantero-Garrito, 2020). In this sense, the adaptation process seems to require a reorganization of tasks and occupations of daily life (Kingston et al., 2010; Parsons & Stanley, 2008). Such reorganizations are fundamental for health promotion, quality of life and survival itself (Iwarsson et al., 1998).

The process of ruptures in everyday life would affect not only the people who suffer them, but also those who make up the social network around them, which would lead people to experience changes in their everyday lives and in occupational engagement¹ in a different way,

¹Understood as the performance of the doing of occupations when there is a product to be achieved. (McDougall et al., 2014).

depending on the context in which they are inserted. (Kingston et al., 2010; McDougall et al., 2014; Naidoo et al., 2017a; Naidoo et al., 2016; Parsons & Stanley, 2008).

Social inequality is also something that permeates the daily lives of many people in the rural world. Poverty, social vulnerability and labor exploitation are stressors that affect the social participation of people of different ages (Bartie et al., 2016; Crouch, 2008; Prieto-Bueno & Cantero-Garlito, 2020; Santos & Menta, 2016). However, physical and relaxation activities can serve as strategies to promote health and quality of life (Crouch, 2008).

Thus, with the singularity of the demands of the rural environment, occupational therapists may face different needs, implying practices that focus on the treatment of chronic diseases, such as lymphedema (King & Coman, 1993), for the prescription and preparation of assistive technology (Cronin, 2018; Murphy, 1996), for the management of post-traumatic stress (Bontempo et al., 2008), for work on ergonomic adaptation (Bowman, 2012), work in the area of child development (Cronin, 2018; Lust & Donica, 2011) and in the area of mental health (McKinstry & Cusick, 2015).

As a result, some instruments for intervention were developed to work with specific populations. *¡Vivir mi Vida!*, for example, is a method for intervention with Latino populations aged 50 to 64 and rural workers in the United States of America (Niemiec et al., 2019). The *Crosstrainer Program* (CTP) is a South African intervention method aimed at child development in rural regions with scarce resources and access to services (Villiers et al., 2019). The *Capabilities, Opportunities, Resources and Environments* (CORE) is an inclusive intervention approach that aims to enhance the capabilities, opportunities, resources and environment of the person served, including in rural areas (Pereira et al., 2020).

These texts go in the direction of confirming and promoting the contribution of the occupational therapy professional. Even if they share the work environment with colleagues from other professions, they would be able to identify demands related to everyday life that, often, neither the other team members nor the population served would be able to identify (Murphy & Lam, 2002).

However, the therapeutic-occupational practice in Primary Health Care in the rural environment would allow the insertion of the professional in this community through the health sector, at the same time that it would allow the professional a territorial action, as well as a more articulated and horizontalized relationship with the population, a more participatory and communitarian practice (Van Rensburg & Toit, 2016; Souza et al., 2021), making these practices gain an important place in professional action when in rural areas.

Barros et al. (2002) highlight the importance of apprehending the territorial dimension in professional practice, a dimension that does not only refer to a geographically demarcated space, but historically, culturally and economically constructed, which presupposes ways of existing, relating, working and dreaming. The works under study raise, to some extent, this question, although, in most cases, the rural territory is emphasized much more by its geographical composition, which signals the need to broaden this apprehension.

In dialogue with this debate, in other parts of the world, a design of professional practice in rural areas is the so-called community occupational therapy, which consists of the professional's collaboration with people in their community and context (Townsend et al., 1988). Community occupational therapy is seen as an approach that could be used to mobilize people to think and create actions to enhance the context in

which they live, improving quality of life and promoting health (Watson, 2013). It could also be combined with other approaches in order to improve the perspective and insertion of the professional in rural communities (Lauckner & Stadnyk, 2014).

Bianchi & Malfitano (2020) highlight different senses of community used in occupational therapy. According to these authors, communities can be social groups, a physical space and even a descriptor of social vulnerabilities; moreover, they relate social participation, belonging and context of the subjects in the community in a plural way, which implies an idea of community therapeutic-occupational intervention that departs from traditional clinical practice, turning to collective and community processes.

Faced with the long distances to be covered by professionals to carry out face-to-face interventions, communication and information technologies have proven to be great facilitators for this (Taylor & Lee, 2005; Wakeford et al., 2005; Hoffmann & Cantoni, 2008; Hegel et al., 2011; Chedid et al., 2013). Teleservice would allow more people to have access to the occupational therapy service without leaving their territory. It would allow professionals to meet the demands for guidance and prescription of activities (Chedid et al., 2013), assisting in the monitoring, management and guidance related to the demands of the people assisted, as well as being a way of assisting the person in their life context (Gardner et al., 2016; Hoffmann et al., 2008; Langbecker et al., 2019).

However, telecare depends on access to necessary resources by both the person assisted and the professional, and makes it impossible to meet demands that imply direct and close contact with the person assisted (Hoffmann & Cantoni, 2008). In addition, in some countries, such as Brazil, telemarketing is not allowed by the bodies that regulate the profession, which, however, was an exception during the COVID-19 pandemic (Conselho Federal de Fisioterapia e Terapia Ocupacional, 2013, 2020), indicating the need for further discussion about this procedure among occupational therapists (World Federation of Occupational Therapists, 2021).

Several factors influence the professional's decision-making regarding working in rural areas, such as previous personal experience and personal tastes in relation to the rural lifestyle (Markewitz, 1992; Mills & Millstead, 2002). However, the practice in this environment is challenging, since, like the urban environment, the rural environment is unique and has a variety of demands, but with fewer services and professionals to meet them. Furthermore, studies report the lack of support for the rural occupational therapist, which, in general, can lead to a feeling of isolation. In addition, working in the rural community can trigger personal problems, such as difficulty making friends, rejection from the community, privacy issues, and raising children (Mills & Millstead, 2002).

One way to prepare occupational therapy professionals to work in rural areas is education. With that in mind, the University of South Dakota, in the USA, added a module related to the rural environment to its curriculum, allowing students in the area to discuss and study this context in a way specifically focused on occupational therapy (Smallfield & Anderson, 2008).

Some strategies to deal with the feeling of isolation and the lack of professional support mentioned were formulated, such as the creation of an exchange link with other rural occupational therapists and Permanent Education strategies (Steenbergen & Mackenzie, 2004). In Australia, there is a reference to a study that focused on the perspective of occupational therapists on rural practice and the lack of support for the professional was documented. One strategy was to create a virtual network for

exchanging information (Elliot-Schmidt & Strong, 1995). Still, another way to stay prepared and up-to-date on professional practices in rural areas would be through continuing education strategies, which can be autonomous or systematized in the form of courses by a reference institution (Hu, 2012; Nipp et al., 2014). With this, according to Hu (2012), many occupational therapists working in rural England would have the habit of maintaining a study routine to carry out evidence-based practice.

In this panorama, it is worth mentioning that the occupational therapy professional can be inserted in sectors other than the health sector, such as education or social assistance, even if, sometimes, they convey a practice based on answers related to health, which calls for a discussion of this property. The action of occupational therapists in the rural school environment could help to minimize the inequality of teaching in relation to urban schools, proposing an integration of community and political resources in favor of guaranteeing an adequate education system to the demands of the sector in this context (Regan, 1982). The occupational therapy professionals can also work in this section of the school in the rural environment in order to place themselves in a position of social articulator that contributes to the recognition of the needs and potentialities present in the lives of these subjects, as well as their interests, in the micro and macrosocial factors (Farias et al., 2019).

Despite the presence of territorial, community, face-to-face and remote practices in occupational therapy aimed at the rural world, the necessary concern with its cultural, social and historical singularities was little addressed, considering the importance of apprehending the contexts of life and everyday life for the profession generally. In addition, studies focused on the perception of users of professional services about this practice were also scarce, which ends up leaving gaps on the necessary adjustments so that it can be more effective for those who receive it. This scarceness ends up being a reflection of the contradiction experienced by occupational therapists working in rural areas, since initial training has not been specifically focused on this theme, perhaps also due to the lack of studies that take the theme in its specificities as central to the area.

Conclusion

The rural environment is a context with unique and singular characteristics, with different demands, but with an insufficient number of occupational therapists working in it. Studies on occupational therapy in the interface with the rural environment have been produced since the 1980s; however, this subject remains with little visibility in the area.

Although this study covered only three databases which, despite having their academic relevance well recognized, do not represent the whole, in addition to including articles published only in English, Spanish and Portuguese, highlights the limitations and the importance of other studies to cover it. This work systematized the references and the main findings on the subject, and it can be said that professional support and the theoretical foundation for several problems that are the responsibility of the occupational therapist in rural areas are still scarce and insufficient.

Therapeutic-occupational practices in this context occur in different countries around the world, making use of different work methodologies that seek to deal with the specificities of each place. It is worth noting the community and call center practices, as well as the presence of the theme, among Australian professionals and researchers, followed by Americans and South Africans.

In addition, several possibilities of action were perceived, aimed at a collective and socially referenced perspective. However, these dimensions of work still need to be better discussed, such as matters around historical-social issues related to collective, social and cultural vulnerabilities.

This would be, for example, an interesting path to inform professional action in the Brazilian rural territory, marked by the Agrarian Question, considering that it involves problems related to the use, possession and ownership of land, inherent to capitalism and, in the case of Brazil, historically marked by land concentration, which result in important conflicts and social inequalities in the countryside, such as the expulsion and exploitation of peasants, the struggle for land and agrarian reform, violence and repression, resistance movements for existence in rural areas and the disputed development models. Thus, involving social, political and economic aspects, as well as peasant resistance, which fights for living spaces, for agrarian reform and for the democratization of the land.

Finally, it is noted that the analyzed studies can contribute to professional practice and, considering the Brazilian context, can help to advance action technologies, whether in the contextualized application of what already exists, such as the use of telemarketing and communitarian occupational therapeutic practice, whether with the identification of bottlenecks, such as the need to develop a more cultural, social and collective understanding of action in the territory/rural world.

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Mateus Francisco da Silva was responsible for the process of collection, systematization and analysis of data, writing and revision of the text. Magno Nunes Farias was responsible for the process of data analysis, writing and revision of the text. Roseli Esquerdo Lopes was responsible for the process of data analysis, writing and revision of the text. All authors approved the final version of the text.

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