

Original Article

# Description of curricula of occupational therapy programmes offered worldwide

*Descrição dos planos de estudo dos currículos dos programas de terapia ocupacional oferecidos em nível mundial*

*Descripción de los planes de estudio de programas de terapia ocupacional ofertados a nivel mundial*

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## Abstract

**Introduction:** The description of study programs in university education allows for updates, according to global trends and the needs of local and regional contexts. It is also one of the criteria for the evaluation of the quality of higher education according to the regulations of each country. **Objective:** To describe the study programs of different occupational therapy programs worldwide. **Method:** A descriptive study, with a convenience sample of 36 study programs. For the collection and analysis of the information was elaborate an identification matrix based on previously established variables. Subsequently, their similarities and differences were established. **Results:** It was found that the average training time was 4.1 years for Latin America. The clinical line of study has a greater number of courses worldwide, except in Latin America where the mental health line predominates. **Conclusion:** A general overview of the structure of the various study programs worldwide was shown, which allows reflection on the trends of professional profiles according to the epistemological change of the profession and global, regional, and local needs.

**Keywords:** Higher Education, Professional Training, Occupational Therapy, Curriculum.

## Resumo

**Introdução:** A análise dos planos de estudo na educação universitária permite que as atualizações sejam feitas de acordo com as tendências globais e as necessidades dos contextos locais e regionais. É também um dos critérios para a avaliação da

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qualidade do ensino superior de acordo com as regulamentações de cada país.

**Objetivo:** Descrever os planos de estudo de diferentes programas de terapia ocupacional em todo o mundo. **Método:** Estudo descritivo, com uma amostra de conveniência de 36 planos de estudo. Para a coleta e análise das informações, foi criada uma matriz de identificação para cada plano de estudo, com base em variáveis previamente estabelecidas. Posteriormente, suas semelhanças e diferenças foram identificadas. **Resultados:** Verificou-se que o tempo médio de treinamento foi de 4,1 anos para a América Latina; a linha de estudo da área clínica tem um número maior de cursos em todo o mundo, exceto na América Latina, onde predomina a linha de saúde mental. **Conclusão:** Foi encontrada uma visão geral da estrutura dos vários planos de estudo em escala global, o que nos permite refletir sobre as tendências dos perfis profissionais, de acordo com a mudança epistemológica da profissão e as necessidades globais, regionais e locais.

**Palavras-chave:** Educação Superior, Capacitação Profissional, Terapia Ocupacional, Currículo.

### ***Resumen***

**Introducción:** La descripción de los planes de estudio en la formación universitaria permite realizar actualizaciones de sus contenidos, de acuerdo con las tendencias mundiales y las necesidades de los contextos locales y regionales, con miras a ofertar una educación de calidad. Así mismo, es uno de los criterios para acreditar los programas de educación superior, según la normatividad de cada país.

**Objetivo:** Describir los planes de estudio de programas de terapia ocupacional a nivel mundial. **Método:** Estudio descriptivo, con una muestra a conveniencia de 36 planes de estudios. Para la recolección y análisis de la información, se elaboró una matriz de identificación de cada plan de estudios a partir de variables previamente establecidas. Posteriormente, se establecieron sus similitudes y diferencias. **Resultados:** El tiempo de formación varía por región; con un promedio de 4,1 años para Latinoamérica; la línea de estudio del área clínica cuenta con mayor número de cursos a nivel mundial, excepto en Latinoamérica donde predomina la línea en salud mental. **Conclusión:** Se evidenció un panorama general sobre la estructura de los diversos planes de estudio a escala mundial, lo cual permite reflexionar sobre las tendencias de los perfiles profesionales de acuerdo con el desarrollo epistemológico, profesional, disciplinar y a las necesidades mundiales, regionales y locales.

**Palabras clave:** Educación Superior, Formación Profesional Superior, Terapia Ocupacional, Currículo.

## **Introduction**

### **International context of higher education**

The United Nations, based on the 2030 Agenda and the Sustainable Development Goals (SDGs) proposed in 2015, points out in its objective 4,

regarding education, the need to “Guarantee inclusive, equitable, quality education and promote lifelong learning opportunities for all” (Naciones Unidas, 2015, p. 1). In goal 4.3, it projects by 2030 to “ensure equal access for all men and women to quality technical, vocational and higher education, including university education” (Naciones Unidas, 2015, p. 1).

In the same vein, the United Nations Educational, Scientific and Cultural Organization (hereinafter, UNESCO) and other organizations presented the Incheon Declaration in the same year, under which they commit to promoting learning opportunities for quality throughout life for all people, in all contexts and at different educational levels (UNESCO, 2015). This applies to higher education, which requires, according to the Declaration, equal access, teaching focused on quality assurance, flexible learning opportunities, validation and accreditation of knowledge, skills and competencies acquired through informal and non-formal education. A commitment is also established to strengthen science, technology and innovation, making use of information and communication technologies (ICT) to “strengthen educational systems, the dissemination of knowledge, access to information, effective and quality learning and more effective service delivery” (UNESCO, 2015, p. 8).

On the other hand, the Organization for Economic Cooperation and Development (OECD), the Development Bank of Latin America (CAF) and the Economic Commission for Latin America and the Caribbean (ECLAC), indicated in the publication *Economic Perspective for Latin America* that, despite the progress seen in education and skills development, there is still much to be done to improve educational standards and address socioeconomic inequalities (Organización para la Cooperación y el Desarrollo Económicos, 2014). Associated with this, according to another study by the same authors, in the Latin American region it is necessary to promote economic growth to improve the level of higher education, promote innovation and diversification, in order to stimulate greater economic growth, improve the distribution of income and meet the growing demand for specialized personnel in different areas of knowledge (Organización para la Cooperación y el Desarrollo Económico, 2017).

## **Context of Higher Education in Colombia**

In accordance with what is stated in the Political Constitution of Colombia, education is considered a fundamental right (Colombia, 1991). This right is reaffirmed and structured through Law 30 of 1992, which describes the purposes, objectives, fields of action, academic programs and functions of the academic community of higher education. Likewise, it states a series of general processes and norms that regulate the public education service and proposes the creation of the National Accreditation Council as an academic body that depends on the National Council of Higher Education (CESU) (Colombia, 1992).

The National Accreditation Commission is in charge of leading the National Accreditation System, which guarantees high-quality educational services and, in Agreement 02 of 2020, the accreditation processes of academic programs are updated,

which are evaluated in twelve factors, among which are: the educational project of the program and institutional identity, students, graduates, professors, academic aspects, learning results, among others. This reflective and self-evaluation exercise requires that the Higher Education Institution (IES) carry out a comparative analysis with the study programs of other countries, which extends to the training competencies of human talent (Colombia, 2020).

### **Study programs within the Framework of Quality Improvement in Higher Education**

The configuration of a study program in an IES (Higher Education Institution) is essential for training and professional practice. The study program is part of the curriculum, which is understood as

[...] the set of criteria, study programs, programs, methodologies and processes that contribute to comprehensive training and the construction of national, regional and local cultural identity, also including the human, academic and physical resources to put policies into practice and carry out the institutional educational project (Colombia, 1998, p. 1).

This plan responds to the requirements of the educational quality policy that articulates the different educational levels and requires educational institutions to be accountable to society for the educational service they provide and promote permanent institutional self-evaluation and its academic programs under an evaluation culture (Colombia, 2019a).

The above is designed within a framework of quality and continuous improvement, in which the training offer seeks for students to develop cognitive, personal and social competencies proposed in the curriculum, in interaction with activities, processes and quality structures. In this way, they are expected to obtain the expected results, in a process in which actors as diverse as students, government entities, professional groups, employers, scientists, among others, participate (Flaig, 2007; Knoll, 2007, as cited in Zúñiga-Arrieta & Camacho-Calvo, 2022).

### **The Study Programs in Occupational Therapy Training**

According to the World Federation of Occupational Therapists (WFOT), Occupational Therapy is an autonomous profession that deals with the promotion of health and well-being through occupation. Its main objective is to enable individuals or groups to achieve the highest level of independence possible in their daily lives, facilitating participation in their environment.

The WFOT establishes minimum standards for occupational therapy programs that promote and ensure the quality of education and program development at different levels of training. According to Crabtree et al. (2001, as cited in Federación Mundial de Terapeutas Ocupacionales, 2016, p. 6), educational programs have various responsibilities in the training of occupational therapists and must be connected to “the macroeconomic expectations of societies that respond to global, social, scientific, economic and political dynamics”. They also provide elements for

the accreditation of the programs, through quality and its assurance in accordance with the national accreditation procedures of different countries (Federación Mundial de Terapeutas Ocupacionales, 2016).

Such is the case of internship training in occupational therapy, which according to Pashmdarfard et al. (2022) to ensure its quality, the participation of different key actors is required such as universities, students, health networks and educators, who play a very important role in creating a relationship that favors successful learning, which constitutes a challenging task (Pashmdarfard et al., 2022). The scarce literature that investigates the study programs commitment and the contents of the study programs in the training of occupational therapists leads to questioning how universities are organizing their study programs structure and plans, and whether these respond to the training challenges and social needs, which will finally be evident in professional actions. The objective of this article is to describe the study programs of different Occupational Therapy programs around the world and compare them with the one developed by the Manuela Beltrán University (UMB), located in Colombia, as part of the necessary inputs to establish the continuous improvement plan in accordance with what was proposed by the National Accreditation Council at the head of the National Accreditation System, to maintain and strengthen the quality of higher education.

## **Method**

### **Type of study**

Descriptive study of the study programs offered in different occupational therapy training programs around the world for the year 2019 (Guevara Albán et al., 2020).

### **Population and sample**

The population was the curricula of occupational therapy training programs. A convenience sample of 36 study programs was taken, which were distributed as follows: Latin America (10), Europe (7), Oceania (2), Africa (3), Asia (7), United States and Canada (6). In the case of Colombia, the analysis was carried out on the curriculum of the Manuela Beltrán University.

### **Analysis variables**

The variables analyzed were those related to the identification of the training program: location, country, name of the university, duration of the programs in years and months. Likewise, the total number of courses offered and for each training area: occupation, clinical, mental health, community and work.

## **Source and instrument for information collection**

The source of information was the websites of the universities that offered occupational therapy programs endorsed by the WFOT and selected at convenience. A matrix was prepared in Excel version 2019 (v19), as an instrument for collecting information. Its structure included 21 fields, divided into three segments. The first segment related to the identification and name of the program and the second with the description of the lines of study by training areas. Finally, the third segment contains a field related to the differentiating agent declared by each program.

## **Data collection and analysis procedure**

The search for information was carried out in two stages; the initial stage consisted of consulting the website of the WFOT, the leading body of Occupational Therapy in the world, which sets the standards for its practice and has official information on all Occupational Therapy programs that have received endorsement from the Ministry of Education of each country. At this stage, the programs offered by continent were also identified.

Once the programs endorsed by the WFOT were identified, the second stage was carried out, which required a selective search of the study programs on their official websites. Those study programs updated in the last seven years, in any language, were included. Study programs that were outdated or incomplete or that contained less than 50% of the analysis variables previously established by the researchers were excluded.

The analysis of information regarding training time, total courses and Courses and training trends was developed through absolute and relative frequencies, averages and standard deviations. A general description of courses offered by each professional line was made and finally, through a comparative table, similarities and differences in professional training were identified with respect to the Manuela Beltrán University.

## **Results and Discussion**

### **Description of study programs and training time**

Thirty-six (36) study programs from five continents were described. In the case of America, two regions are distinguished: Latin America for its socioeconomic and cultural conditions similar to Colombia, and the United States and Canada (USA/Canada) for the history and antiquity of its training programs. In Latin America, eleven (11) universities were analyzed, three (3) from Argentina, three (3) from Chile, three (3) from Brazil, one (1) from Mexico and one (1) from Colombia. Six (6) universities were considered for the USA/Canada, while for Europe seven (7) located in England, Spain, France, Germany, Ireland, Italy and Finland were reviewed. In Oceania, one (1) study program was described for Australia and one (1) for New Zealand. In the case of Africa and Asia, ten (10) belonging to South Africa, Morocco, Mauritius, Thailand, Hong Kong, India, Israel, Japan, South Korea and Bangladesh are analyzed.

Regarding training time, in the case of Latin America, of the 11 selected universities, 55% (6 universities) have an average training duration of 4.1 years. For the USA/Canada, 50% (3 universities) carry out training processes in 3 years and the other 50% train occupational therapists in 2 years. It is important to highlight that in these two countries the final degree obtained is a Master's Degree in Occupational Therapy, which is certified once the thematic content of professional skills and prior training in health of around three years is developed.

In Europe and Oceania, of the 9 universities consulted, it was evident that 56% (5 universities) offer a 3-year training and 22% (2 universities) in 4 years. In Asia and Africa, 60% of universities train in 4 years (6 universities) and 30% (3 universities) in a period of 3 years. In general, for 41.6% (15 universities) the training time is 4 years, followed by 33.3% (12 universities) with 3 years corresponding to Europe, Oceania, Asia, Africa, the United States and Canada. Thirdly, 2.5 years are offered corresponding to 25.1% (9 universities). These results are detailed in Table 1.

### **Courses included in the study programs**

For Latin America, it was found that approximately 72% (8 study programs) offer more than 40 courses. The average number of total courses is 53.9 (SD 16.11). In the USA/Canada, 50% of the study programs have 20 to 29 courses and the other 50% have 30 to 39 courses. In the case of Europe and Oceania, approximately 67% of the study programs (6 study programs) have 20 to 39 courses, the average number of subjects is 38 (SD 19.6). In Asia and Africa, 40% (4 study programs) provide between 30 and 49 total courses. It is important to mention that Thailand does not detail the number of total courses; however, it describes general courses by fields of knowledge such as humanities and social sciences, sciences and mathematics, health and recreation. For Israel, a general description of the curriculum is also evident that includes basic and interdisciplinary training. These results are detailed in Table 1.

### **Courses**

Regarding the total number of Courses, for Latin America there were five universities (45%) with 20 to 29 courses, followed by three universities (27%) that taught between 10 and 19; the average was 23 courses (SD 9.5). In the USA/Canada it was evident that four study programs (67%) offered between 20 and 29 Courses, followed by two universities (33%) with 30 to 39 courses. The average number of Courses offered was 26 (SD 4.9).

For their part, in Europe and Oceania six universities (67%) offered between 10 to 19 courses, two universities (22%), between 20 to 29 courses and one between 30 to 39 subjects; the average was 19.2 (SD 7.8). In Asia and Africa, five universities (50%) offered between 20 to 29 courses, while three higher education institutions (30%) offered between 1 and 19. Table 1 details these results.

**Table 1.** Description of study programs by regions and continents.

Information of the study programs	Latin America		USA and Canada		Europe and Oceania		Asia and Africa	
	n=11		n=6		n=9		n=10	
	N (%)		N (%)		N (%)		N (%)	
<i>Duration of the course</i>								
Of 5 years	2	27%	0	0%	0	0%	1	10%
Of 4,5 years	2	9%	0	0%	0	0%	0	0%
Of 4 years	6	55%	0	0%	2	22%	6	60%
Of 3,5 years	0	0%	0	0%	1	11%	0	0%
Of 3 years	1	9%	3	50%	5	56%	3	30%
Of 2 years	0	0%	3	50%	1	11%	0	0%
<i>Total courses</i>								
From 1 to 19	0	0%	0	0%	0	0%	1	10%
From 20 to 29	1	10%	3	50%	3	33%	0	0%
From 30 to 39	0	0%	3	50%	3	33%	4	40%
From 40 to 49	4	40%	0	0%	1	11%	2	20%
From 50 and more	5	50%	0	0%	2	22%	1	10%
Others	0	0%	0	0%	0	0%	2	20%
<i>Courses</i>								
From 1 to 19	3	30%	0	0%	6	67%	3	30%
From 20 to 29	5	50%	4	67%	2	22%	5	50%
From 30 to 39	2	20%	2	33%	1	11%	0	0%
From 40 to 49	0	0%	0	0%	0	0%	0	0%
From 50 and more	0	0%	0	0%	0	0%	0	0%
Others	0	0%	0	0%	0	0%	2	20%

**Source:** Own elaboration

## Description of the study lines

### *Occupation line*

The occupation line includes all those subjects with conceptual foundations in occupational therapy. In Latin America, subjects were found such as psychosocial dysfunction, community health, foundations and epistemology of occupation science, models in the study of occupation, occupation and networks, occupational history and profiles, professional reasoning. In the case of Europe and Oceania, occupation and the science of human activity, occupational performance throughout the life cycle, health promotion through occupation and sociology of health and illness for occupational therapy.

In Asia and Africa, there are occupational therapy sciences, participation in occupation, humans as occupational beings and enabling occupations: conditions of development. In the United States and Canada, they teach subjects such as occupation and society: theory and practice, influences on occupational performance, human determinants of occupational performance, occupational analysis and adaptation.

### *Clinical line*

Regarding the clinical line, two approaches were evident. The first of them is aimed at understanding the functioning of the organism by each of its systems, for example, courses



in anatomy, physics, biology, among others, are taught. In the second approach, specific knowledge is imparted about the occupational therapist's role in physical and sensory function/dysfunction. In general, courses were found such as occupational therapy in developmental dysfunctions, in geriatrics and gerontology, theory and practice from clinical reasoning, behavior and occupational performance in specific health conditions: musculoskeletal, central and peripheral nervous system, among others. Additionally, in courses aimed at the evaluation process and interventions, development of orthoses and assistance devices throughout the life cycle.

In the case of Latin America, courses were found such as applied pathology, occupational therapy in the upper limb, health services management, and equipment: orthoses, splints, prostheses, adaptations and simplified technologies, therapeutic skills, among others. In Europe and Oceania, new technologies and accessible environments; introduction to clinical gait, hygiene and pharmacology, participation in old age: concepts and approaches, techniques and tools for patient education in occupational therapy; complexity in practice, among others.

Asia and Africa, courses such as oncology and cardiorespiratory occupational therapy, sensory rehabilitation, and advanced rehabilitation were observed. Finally, in the United States and Canada, the following stand out: neuroscience across the lifespan and research based on practical and evidence-based methods and approaches.

### *Education line*

Professional training in the line of education seeks to “organize and provide services to the educational community and the population with special, temporary or permanent needs, through promotion, prevention, leveling and remediation” (Colombia, 2005, p. 2). In this line, there are subjects based on neurodevelopment, psychology, pedagogy and bioethics. In Latin America, courses such as group dynamics, occupational performance in leisure, special pedagogy, social psychology of institutions and groups, child and adolescent psychopathology, child development and school inclusion were observed.

For Europe and Oceania, occupational therapy courses are observed for personal autonomy in childhood and adolescence, child development in multicultural society, occupational performance: home and family; people with intellectual disabilities. In Asia and Africa, courses such as reeducation and rehabilitation are distinguished; occupational therapy, pediatrics and cognition, sensory integration therapy (Capstone design). In the USA/Canada, subjects such as occupational performance in children and special occupational therapy topics are offered: pediatric care processes, evidence-based practice and translational occupational therapy.

### *Mental health line*

As in the clinical line, in mental health a set of foundation subjects is offered such as anatomy, psychology, psychiatry and psychopathology, as well as occupational therapy subjects in mental health that allow focusing on the role of the professional, which are oriented according to Eberhard Aguirre & Torrico Mayol (2013) in the treatment of

crises, functional recovery, development of capabilities and restoration of diminished psychological and social functions (Eberhard Aguirre & Torrico Mayol, 2013).

In Latin America, courses are offered such as health anthropology, psychosocial dysfunctions, occupational therapy in community health, introduction to social research, introduction to social thought, pharmacology, human rights, collective health and personality and human development. For Europe and Oceania, there are advanced practice courses such as children, young adults and families; child and adolescent mental health, depression and alcohol and drug rehabilitation. In Asia and Africa, the subjects are aimed at understanding occupational therapy intervention in mental health, as in the United States and Canada.

### *Community line*

The objective of the community line for the case of Colombia and generalizable for Latin America, is “to work on rehabilitation and re-socialization programs for vulnerable populations, to facilitate participation and occupational performance, mobilization and social organization, with the objective of promoting adaptive behaviors.” (Colombia, 2005, p. 2). In Latin America, courses such as health promotion and prevention are available with the aim of increasing the quality of life. Other courses available are: psychological and sociocultural foundations of intervention, public policies, diagnosis and interdisciplinary intervention in rehabilitation with an inclusive perspective, culture and contemporaneity and occupational therapy, anthropology and sociology. In Europe and Oceania, courses are offered such as community-based occupational therapy, autonomy for the elderly; life, diversity and health; factors that influence social and cultural worlds; migration and immigration; therapeutic action, sensitive culture and indigenous communities, among others.

In the case of Africa and Asia, some universities do not mention offerings in this line, in others there are evaluation/analysis courses and interventions related to the environment, community, rehabilitation in society and community-based rehabilitation. Finally, in the United States and Canada, subjects such as race, culture, and health disparities are observed; occupational therapy in underserved populations; indigenous forms of knowledge and critical perspective of disability.

### *Labor line*

The objective of training in the workplace is to acquire skills so that the occupational therapist can venture “in a planned and coordinated manner, into the identification of the characteristics, demands and requirements related to people’s abilities and skills, seeking their productive and competent performance” (Colombia, 2005, p. 1). In Latin America there are courses related to general concepts of work, habilitation and professional rehabilitation in people with professional disadvantages, labor occupational therapy; occupational health and ergonomics; socio-labor inclusion and social and labor psychology.

In Europe and Oceania, courses such as vocational rehabilitation, socio-occupational inclusion, ergonomics and work design, health and work, injury prevention in the workplace and occupational performance in productivity are available. In Africa and Asia, the following are offered: work physiology and ergonomics, adaptation and design,

and vocational rehabilitation. The United States and Canada present a development of subjects similar to that described in the case of Africa and Asia.

In summary, Latin America led the mental health line with an average of 16.3 courses, followed by the clinical line with 15.4 and in third place is the occupation line with 14.7 courses. In the case of the other regions, the clinical line is positioned first with an average range between 8.6 to 9.2 courses. For the United States and Canada, the education line is in second place with an average of 5.2 courses and the community line is in third place with 4.5 courses. In Europe and Oceania, the community and mental health lines are in second and third place, with an average number of courses of 6.6 and 6.2, respectively.

Finally, for Asia and Africa, there is the mental health and occupation line, with an average of 3.7 and 3.4 courses, respectively. Worldwide, the professional line of the labor area is the one with the lowest number of courses on average, for example, Latin America offers 11.3 courses; Europe and Oceania 4.8 while USA/Canada, Asia and Africa 2.4. Figure 1 describes the courses offered worldwide by lines of study and Figure 2 describes the relationship between the lines of study and their preferences between continents and/or regions.



Figure 1. Courses offered by curricular lines worldwide.

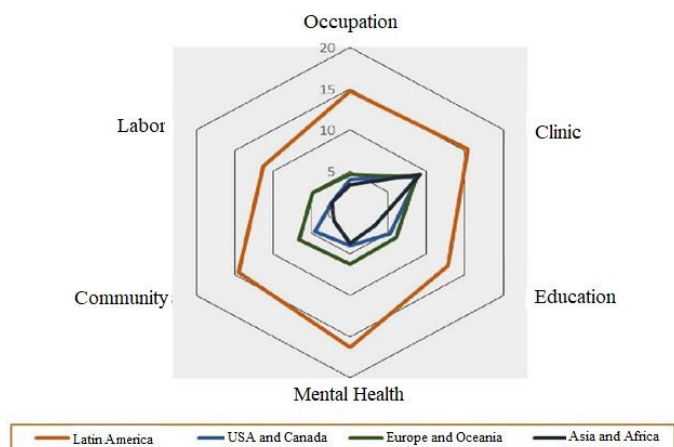


Figure 2. Training preferences according to curricular lines by continents and/or regions.

### Similarities and differences between study programs

In order to establish the similarities and differences between the study programs of the Manuela Beltrán University with other universities, the study programs of the USA/Canada and Latin America are taken as reference. In general, the similarities lie in the name of the lines of study which are clearly identified for each of the regions, with a greater preponderance of courses in the clinical line for the UMB and the USA/Canada and with a smaller number of courses in the education line for Latin America and UMB. On the other hand, the training times between the Manuela Beltrán University and Latin America are similar with a range between 4 to 5 years. These differences can be seen in Table 2.

**Table 2.** Comparative table of the Occupational Therapy program of the Manuela Beltrán University vs. Universities in Latin America, the United States and Canada.

Aspects to compare	Universidad Manuela Beltrán	Latin America Universities	USA and Canada Universities
Training duration	4.5 years	4 years	3 years
Number of total courses offered	50 courses and more	50 courses and more	30 to 39 and more
Number of lines of study	6	6	6
Lines of study with the greatest number of courses	Clinical line	Occupational line	Clinical line
	Occupational line	Mental Health line	Educational line
Lines of study with fewer course numbers	Educational line	Educational line	Labor line
		Community line	Community line
Differentiating agent	Alternative and complementary therapies	Training in rights approach, social and community development	Translational Occupational Therapy Sexuality and gender

**Source:** own elaboration.

One of the most important differences is that the USA/Canada offer fewer total courses compared to the UMB and Latin America, associated with the training time. Likewise, less development of courses in the labor and community line for the USA/Canada in relation to the UMB and Latin America. It is important to highlight the differentiating agent in training. For the United States and Canada, the training profile is distinguished by deepening clinical practice such as translational occupational therapy, as well as reflecting on sexuality during the life cycle and in diverse populations such as children with disabilities, in marginalized communities and the production of toys and positioning aids for sexual activity.

In Latin America, the trend in the training of professionals focuses on the study of occupation, the humanities and inclusion. For example, in the humanities courses are offered such as sociology, health anthropology, introduction to social thought and in inclusion the courses are oriented towards special pedagogy, recreation and inclusive sports, socio-labor inclusion and in educational systems, rehabilitation and inclusion with a focus on human rights. There are also courses on creative and collective processes and collective health. Additionally, Latin American professionals participate

in activities linked to promotion, prevention, and rehabilitation processes under critical-reflective thinking, and focused on human rights, social inclusion, and respect for diversity.

According to the results obtained, several sensitive characteristics can be established to interpret in occupational therapy study programs. One of them is the training time, which may depend on what is established in the structure of the educational system of each country. In the case of Latin America, 92% of the study programs offer a training time between 4 to 5 years. Such is the case of Argentina, where the Higher Education Law No 24,521 establishes a minimum of 4 years in university training and whose name is a bachelor's degree or equivalent professional titles (Argentina, 1995).

The situation is similar in Chile (Colombia, 2017) and in Brazil where the Ministry of Education grants a range of undergraduate training between 4 to 6 years, and retains the same name as in Argentina, that is, Bachelor of Occupational Therapy and also uses Bachelor's title for the case of Brazil (Colombia, 2018d). In Mexico, the range of university training is extended from 3 to 6 years (Colombia, 2017a). Finally, in the case of Colombia, training takes between 4 to 5 years.

In the USA/Canada, universities offer training between 2 to 3 years since there are important variations in the structure of the educational system with respect to Latin America. The most notable difference is that once students finish their basic and secondary education, what is called high school in Colombia, they enter an undergraduate degree in health sciences, whose title is a *Bachelor* and has a training time between 2 to 3 years. Once this training is completed, the student selects which professional area they wish to focus on. This stage lasts between 2 to 3 years and at the end you obtain the Master's degree in Occupational Therapy. This means that the complete training time to practice as an Occupational Therapist in one of these two countries ranges between 4 to 5 years (Colombia, 2018a, 2018b).

In Europe, the training time is less compared to Latin America, the United States and Canada, since unlike these last two countries they do not have basic training in health sciences. In general, the training time is homogeneous among the countries consulted, with a range between 3 to 4 years (Colombia, 2018a, 2018b). Regarding the degree obtained in the case of the United Kingdom, Ireland and Germany, it is a *Bachelor's degree*, however, there are specificities for Germany, for example, the *Bachelor Fachhochschule* FH is obtained from universities focused on Research with a professional-oriented undergraduate degree and *Diplom Fachhochschule* FH is obtained from obtained in universities of applied sciences (Colombia, 2018c). This trend of training time in Europe is maintained throughout countries in Asia and Africa in which, according to the educational system, vocational training is carried out in 3 years, as is the case in India, and Israel and South Africa (Scholaro, 2021).

In the case of Mauritius and Australia, the time range is extended between 3 to 5 years (Scholaro, 2021). Finally, countries such as Thailand, Japan and Morocco are those that have similar characteristics in university education compared to Latin America with a duration between 4 to 5 years (Scholaro, 2021).

The study and reflection on human occupation has been an interest in various fields of knowledge and most frequently in "philosophy and in the biological, human, social and economic sciences" (Trujillo et al., 2011, p. 28). And for The case of occupational

therapy, it is located at the original moment of its development at the beginning of the 19<sup>th</sup> century; period framed in the philosophy of humanism (Schliebener, 2018), from which more appropriate treatment was sought for patients, especially those institutionalized due to their mental health. In fact, this field was one of the precursors to the creation of occupational therapy (Paterson, 2008).

The situation after the two world wars allowed for an important positioning of occupational therapy in the field of health and rehabilitation that is in force until today, due to the holistic perspective it assumed and through which it sought to achieve better states of health in people (Olivares et al., 2015). From here, the so-called clinical and mental health line were delimited both in training and in practice. The first predominates in the universities of the United States and Canada included for this article and is a fundamental axis of training at the UMB. The mental health line, together with community mental health, correspond to the second most common line of training in Latin American programs that could eventually be explained by the origin of the social paradigm of occupation, which has allowed the work of therapists in the socio-community field (Morrison, 2016).

Along with this paradigm, more recent reflections stand out around the phenomenon of social emancipation and occupational therapy, which are based on the theoretical developments of Boaventura de Sousa Santos, specifically the epistemologies of the south and the ecology of knowledge (Lussi, 2021). According to Galheigo (2014, as cited in Lussi, 2021), studies on southern epistemologies allow us to identify that there are various occupational therapies in southern countries, which are related to social movements and struggles for social emancipation and conquest of citizenship rights, many of them from marginalized communities, as a result of colonization processes, which provides an identity different from that which originated the profession in northern countries.

The theoretical advances described, together with the consolidation and strengthening of occupation science as a discipline around 1992, have allowed greater theoretical strength in the understanding of occupation (Molineux & Whiteford, 2011), as well as the consolidation of the line of human occupation. This line is the privileged line of training in Latin America and the second at the Manuela Beltrán University (Universidad Manuela Beltrán, 2013).

## **Conclusions**

This article describes, from a non-representative sample, the study programs of Occupational Therapy programs around the world and compared them with the Manuela Beltrán University located in Colombia, with the aim of providing input in the plan for continuous quality improvement of higher education, in accordance with institutional, national and international guidelines. A description of the elements of the study programs was made, such as the training time, the number of total courses and the lines of study. Subsequently, the similarities and differences between Latin America and the USA/Canada were established with the curriculum of the Manuela Beltrán University.

Among the main conclusions, it can be highlighted that Latin America is the region with the longest training time. Therefore, it offers a greater number of total courses compared to other regions in the world. On the other hand, the clinical area line is the one with the greatest number of courses offered worldwide, unlike Latin America where

the training trend is oriented towards the mental health line, which allows the identification of possible training interests and can be represent the needs of the Latin American context.

Unlike Latin America, the United States and Canada are the countries that offer the shortest training time with an average of 2.5 years and the degree obtained is a Master's Degree in Occupational Therapy. This is due to the configuration of the educational system since students must previously complete health training under the title of *Bachelor of Science* to later complete the Master in Occupational Therapy, so the total training time is 4 to 5 years.

In general, there is a greater number of courses compared to common core courses regardless of the training time, however, the proportion can vary considerably according to the country and/or region. When recognizing a general overview of the training of occupational therapists around the world, we found that the structure of the educational system of each country has a direct impact on the training time of an occupational therapist, which, regardless of the name of the degree obtained, is related to undergraduate professional training.

It should be noted that one of the limitations is the inclusion of a small, non-representative sample, which is why it is suggested for future research to carry out probabilistic sampling that provides greater objectivity regarding the results of the study. On the other hand, it is suggested to delve into training trends through analysis over a long period of time, so that one can reflect on the changes in the offer of the study programs, possibly related to the transformations of the profession and the global, regional and local social and economic context.

## References

- Argentina. (1995, 07 de agosto). Ley No 24.521, de agosto 7 de 1995. Disposiciones preliminares. Educación Superior. Educación superior no universitaria. Educación superior universitaria. Disposiciones complementarias y transitorias. *Boletín Oficial de la República Argentina*, Buenos Aires.
- Colombia. (1991, 04 de julio). *Constitución política de Colombia 1991, de julio 7 de 1991*. Bogotá: Gobierno de Colombia.
- Colombia. (1992, 28 de diciembre). Ley 30, de diciembre 28 de 1992. Por el cual se organiza el servicio público de la Educación Superior. *Boletín Oficial del Estado*, Bogotá.
- Colombia. (2005, 17 de marzo). Ley 949, de marzo 17 de 2005. Por la cual se dictan normas para el ejercicio de la profesión de Terapia Ocupacional en Colombia, y se establece el Código de Ética Profesional y el Régimen Disciplinario correspondiente. *Boletín Oficial del Estado*, Bogotá.
- Colombia. Ministerio de Educación Nacional. (1998). *Términos en letra calidad*. Bogotá: Gobierno de Colombia.
- Colombia. Ministerio de Educación Nacional. (2017). *Sistemas Educativos del Mundo: Capítulo Chile*. Bogotá: Gobierno de Colombia.
- Colombia. Ministerio de Educación Nacional. (2018a). *Sistemas Educativos del Mundo: Capítulo Canadá*. Bogotá: Gobierno de Colombia.
- Colombia. Ministerio de Educación Nacional. (2018b). *Sistemas Educativos del Mundo: Capítulo E.U.A.* Bogotá: Gobierno de Colombia.
- Colombia. Ministerio de Educación Nacional. (2018c). *Sistemas educativos del mundo: Capítulo Alemania*. Bogotá: Gobierno de Colombia.

- Colombia. Ministerio de Educación Nacional. (2018d). *Sistemas Educativos del Mundo: Capítulo Brasil*. Bogotá: Gobierno de Colombia.
- Colombia. Ministerio de Educación Nacional. (2019a). *Sistema de aseguramiento de la calidad de la educación superior*. Recuperado el 12 de julio de 2022, de <https://www.mineducacion.gov.co/portal/Educacion-superior/Sistema-de-Educacion-Superior/235585:Sistema-de-aseguramiento-de-la-calidad-de-la-educacion-superior>
- Colombia. Ministerio de Educación Nacional.(2017a). *Sistemas Educativos del Mundo: Capítulo México*. Bogotá: Gobierno de Colombia.
- Colombia. Ministerio de Educación. (2020). *Acuerdo N° 02/2020. Por el cual se actualiza el modelo de acreditación en alta calidad*. Bogotá: Ministerio de Educación.
- Eberhard Aguirre, A., & Torrico Mayol, P. (2013). Terapia ocupacional en salud mental de corta estadía en clínica de atención privada. *Revista Chilena de Terapia Ocupacional*, 13(2), 45-56.
- Federación Mundial de Terapeutas Ocupacionales - WFOT. (2016). *Normas mínimas para la educación de Terapeutas Ocupacionales. Revisión 2016*. Recuperado el 12 de julio de 2022, de <https://wfot.org/checkout/987/17733>
- Guevara Albán, G. P., Verdesoto Arguello, A. E., & Castro Molina, N. E. (2020). Metodologías de investigación educativa (descriptivas, experimentales, participativas, y de investigación-acción. *Revista Científica de La Investigación y Del Conocimiento*, 4(3), 163-173.
- Lussi, I. A. (2021). Emancipação social e terapia ocupacional: aproximações a partir das Epistemologias do Sul e da Ecologia de Saberes. *Cadernos Brasileiros De Terapia Ocupacional*, 28(4), 1335-1345.
- Molineux, M., & Whiteford, G. (2011). Occupational science: genesis, evolution and future contribution. In E. A. S. Duncan (Ed.), *Foundations for Practice in Occupational Therapy* (pp. 243-255). USA: Elsevier Health Sciences.
- Morrison, R. (2016). Pragmatist epistemology and jane addams: fundamental concepts for the social paradigm of occupational therapy. *Occupational Therapy International*, 23(4), 295-304.
- Naciones Unidas. Asamblea General. (2015). *Transformar nuestro mundo: la Agenda 2030 para el Desarrollo Sostenible*. Recuperado el 12 de julio de 2022, de [https://unctad.org/system/files/official-document/ares70d1\\_es.pdf](https://unctad.org/system/files/official-document/ares70d1_es.pdf)
- Olivares, A. D., Morrison, J. R., Yañez, R. R., & Carrasco, M. J. (2015). ¿Por qué puede ser difícil comprender qué es la Terapia Ocupacional? Una propuesta teórica desde cuatro perspectivas. *Revista Chilena De Terapia Ocupacional*, 15(1), 123-134.
- Organización de las Naciones Unidas para la Educación, la Ciencia y la Cultura - UNESCO. (2015). *Educación 2030: declaración de Incheon Hacia una educación inclusiva y equitativa de calidad y un aprendizaje a lo largo de la vida para todos*. Madrid: UNESCO.
- Organización para la Cooperación y el Desarrollo Económicos - OCDE, Banco de Desarrollo de América Latina, & Comisión Económica para América Latina y el Caribe. (2014). *Perspectivas económicas de América Latina 2015: Educación, competencias e innovación para el desarrollo*. Madrid: OCDE.
- Organización para la Cooperación y el Desarrollo Económicos - OCDE, Banco de Desarrollo de América Latina, & Comisión Económica para América Latina y el Caribe. (2017). *Perspectivas económicas de América Latina 2018. Repensando las instituciones para el desarrollo*. Madrid: OCDE.
- Pashmdarfard, M., Hassani Mehraban, A., Shafaroodi, N., Soltani Arabshahi, K., & Parvizy, S. (2022). Strategies to promote the quality of occupational therapy fieldwork education: a qualitative study. *Medical Journal of the Islamic Republic of Iran*, 36(27), 1-8.
- Paterson, C. (2008). A short history of occupational therapy in psychiatry. In J. Creek & L. Lougher (Eds.), *Occupational Therapy and Mental Health* (pp. 3-16). Philadelphia: Elsevier Limited.
- Schliebener, M. (2018). El diálogo entre terapia ocupacional y filosofía en torno al problema del existir desde el pensamiento de Heidegger. *Cinta De Moebio*, (62), 246-260.
- Scholaro. Countries Universities. (2021). Recuperado el 11 de noviembre de 2021, de <https://www.scholaro.com/pro/Countries>



Trujillo, R. A., Sanabria, C. L., Carrizosa, F. L., & Parra, E. E. (2011). *Ocupación: sentido, realización y libertad. Diálogos ocupacionales en torno al sujeto, la sociedad y el medio ambiente*. Bogotá: Universidad Nacional de Colombia.

Universidad Manuela Beltrán. (2013). *Modelo pedagógico*. Recuperado el 12 de julio de 2022, de <https://umb.edu.co/docs/politicas/modelo-pedagogico-universidad-manuela-beltran.pdf>

Zúñiga-Arrieta, S., & Camacho-Calvo, S. (2022). Referentes teóricos para un modelo de acreditación desde la evaluación y la gestión de la calidad. *Revista Electrónica Educare*, 26(1), 1-19.

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Camila Rodríguez Guevara: Contributed to the data collection, analysis and interpretation of the results and writing of the manuscript. Diana Rocío Vargas-Pineda: Contributed to the analysis and interpretation of the results and writing of the manuscript. All authors approved the final version of the text.

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