

Original Article

# Employability of occupational therapists in the Central-West region of Brazil

## *Empregabilidade de terapeutas ocupacionais na região Centro-Oeste do Brasil*

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### Abstract

**Introduction:** Studies on the mapping of Brazilian occupational therapists address aspects of the employability of these professionals, considering local realities, but little is known about those working in the Central-west region. **Objective:** To characterize occupational therapists in the Central-west region in terms of their sociodemographic profile, employability, and professional practice. **Method:** A descriptive, exploratory, quantitative research in which 187 occupational therapists registered with the Regional Councils of Physiotherapy and Occupational Therapy in the Central-west completed an online form. **Results:** 90% (n=167) were women, and 73% (n=129) had completed a lato sensu specialization. It was found that 55% (n=103) work in the private sector, and 79% (n=147) serve children aged 0 to 11 years old. Half (50%; n=75) of the professionals work at more than one location, 65% (n=124) work more than 31 hours a week, and the types of employment identified were: CLT (28%; n=53), PJ (17%; n=32), and self-employed (17%; n=34). In addition, 46% (n=87) of the participants earn between 4 and 10 minimum wages. The study discusses the absorption of occupational therapists into the private sector, the demand for the opening of public positions in regional services, the lack of a compatible minimum salary for the profession, and the accumulation of work that supplements income, but may also generate overload, including due to the different types of contracts identified in this study. **Conclusion:** The study presented a profile of occupational therapists in the Central-west region and contributes to the understanding of regional demands and to new reflections on professional training and career opportunities.

**Keywords:** Occupational Therapy, Work, Employment, Professional Practice Location.

### Resumo

**Introdução:** Estudos de mapeamento de terapeutas ocupacionais brasileiros abordam aspectos acerca da empregabilidade desses profissionais, considerando realidades locais,

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mas pouco se sabe sobre os que atuam na região Centro-Oeste. **Objetivo:** Caracterizar terapeutas ocupacionais da região Centro-Oeste em relação ao perfil sociodemográfico, empregabilidade e atuação profissional. **Método:** Pesquisa descritiva, exploratória, de abordagem quantitativa, em que 187 terapeutas ocupacionais, inscritos nos Conselhos Regionais de Fisioterapia e Terapia Ocupacional da região Centro-Oeste, preencheram um formulário online. **Resultados:** 90% (n=167) eram mulheres e 73% (n=129) realizou especialização lato sensu. Verificou-se que 55% (n=103) atua na rede privada, e 79% (n=147) atende o público infantil de 0 a 11 anos de idade. Metade (50%; n=75) dos profissionais trabalha em mais de um local, 65% (n=124) realiza mais de 31 horas semanais, e foram identificadas as formas de contratação: CLT (28%; n=53), PJ (17%; n=32) e autônomo (17%; n=34), além de que 46% (n=87) dos participantes recebem entre 4 e 10 salários mínimos. Discute-se sobre a absorção de terapeutas ocupacionais pela rede privada, sobre a demanda pela abertura de cargos públicos nos serviços da região, sobre a ausência de um piso salarial compatível para a profissão, e sobre o acúmulo de trabalho que complementa a renda, mas que, também, pode gerar sobrecarga, inclusive devido às diferentes modalidades de contratação identificadas neste estudo. **Conclusão:** O estudo apresentou um perfil de terapeutas ocupacionais da região Centro-Oeste e contribui para o conhecimento das demandas da região e para novas reflexões sobre a formação profissional e as possibilidades de atuação.

**Palavras-chave:** Terapia Ocupacional, Trabalho, Emprego, Área de Atuação Profissional.

## Introduction

Occupational therapy is a health profession that works with individuals and communities, aiming to promote health and well-being through occupation, enabling the client(s) to participate in daily activities, either by enhancing the clients' occupational abilities or by modifying the occupation or environment (World Federation of Occupational Therapists, 2012).

Its regulation as a profession, alongside physiotherapy, was established by the Decree-Law of October 13, 1969 (Brasil, 1969). Since then, there has been noticeable growth in the profession in the country, driven by an increase in specific service demands and the expansion of occupational therapy professionals in various practice settings.

In the Central-West region, the first occupational therapy program was at the University of Brasília, Ceilândia campus, created in 2008 as part of the University of Brasília's Expansion Plan, linked to the Support Program for the Restructuring and Expansion of Federal Universities (REUNI), established by Decree No. 6,096 of April 24, 2007.

The program, with a biannual intake of 50 students, faces the main challenge of expanding inclusion and student assistance policies and integrating undergraduate and postgraduate education, as well as higher education with basic education (Faculdade de Ciência e Tecnologias da Saúde, 2007). According to information available in e-MEC (Brasil, 2025), the region currently has eight active in-person occupational therapy programs linked to the following higher education institutions: University of Brasília (DF), established in 2008; Goyazes University Center (GO), established in 2010; Universo Goiânia University Center, established in 2011; University Center of the Institute of Higher Education of Brasília (IESB) (DF), which offers the course at two

campuses and started in 2023; University Center of Vale do Araguaia (UNIVAR) (MT); University Center of Várzea Grande (MT); and the Integrated Faculties of Três Lagoas in Três Lagoas (MS), the last three of which are listed as not yet started.

Upon completing their degree, graduates need to register with the Regional Council of Physiotherapy and Occupational Therapy (CREFITO) to legally practice the profession. It is important to note that CREFITO is a regulatory agency that oversees and monitors the practice of the profession, with several branches across the country, organized by specific geographical areas of operation.

Currently, in the Central-West region, four regional councils operate: CREFITO 9 in Mato Grosso; CREFITO 11 in the Federal District; CREFITO 13 in Mato Grosso do Sul; and CREFITO 19 in Goiás – the latter recently created after the division of CREFITO 11, which previously covered both the state of Goiás and the Federal District. According to information provided by these agencies (CREFITO 9, 11, and 13), by April 2024, a total of 1,604 occupational therapists were registered in the region, with the Federal District having the largest number of professionals (624), followed by Goiás (478) and Mato Grosso do Sul (320) and Mato Grosso (182)<sup>1</sup>.

National and international studies addressing the mapping of occupational therapists indicate that most professionals are young adult women (Krug, 2014; Mariotti et al., 2016; Ned et al., 2020; Soares, 2022; World Federation of Occupational Therapists, 2022; Lins & Monteiro, 2023).

In Sergipe, Soares (2022) analyzed the social and demographic aspects, as well as those related to employability and professional areas of 36 occupational therapists, and their study revealed that these professionals work more than 40 hours per week, in both the public and private sectors, and have completed lato sensu specialization courses. The study also shows that they often hold more than one job due to low wages, with 45% earning up to 5 minimum wages.

In Paraná, Mariotti et al. (2016) also revealed that most of the 188 occupational therapists participating in the study had completed lato sensu specialization courses; however, most of them worked in a single job with a daily workload of 6 hours, in public services, and had a monthly income of up to R\$4,000, an amount that was linked to the time of training. This reality was also revealed in a study carried out in Rio Grande do Sul by Krug (2014), which indicated that most professionals also completed a lato sensu specialization and worked in SUS services, with 33.3% (n=90) of them working in healthcare.

It is observed that studies on the mapping of occupational therapists in Brazil address local/state realities, but little is known about the reality of the states in the Central-West region, as well as the Federal District. Therefore, understanding the profession's reality in this region and obtaining information about the sociodemographic and professional profile of occupational therapists can contribute to understanding the configuration of the professional practice scenario, especially in providing better guidance regarding academic and professional training for occupational therapists (Mariotti et al., 2016), specifically in the Central-West region. This is of utmost importance, as universities are required to adapt education to the demands and expectations of the region for the

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<sup>1</sup> This data was acquired from information provided by the ombudsman of CREFITO 9 and CREFITO 13, and by the transparency portal of CREFITO 11.

profession, as guided by the National Curriculum Guidelines for the Undergraduate Course in Occupational Therapy (DCNs) (Brasil, 2002).

Thus, the present study aimed to characterize occupational therapists with active registration in the Regional Councils of Physical Therapy and Occupational Therapy in the Central-West region regarding their sociodemographic profile, employability, and professional practice.

## **Method**

The study followed the guidelines and regulatory standards of Resolution No. 466 of December 12, 2012, from the National Health Council, which pertains to research involving human subjects. It was submitted to and approved by the Research Ethics Committee, under the opinion number 5,640,714 and CAEE number 60398222.8.0000.8093. This study is affiliated with the research group “EducaTO: training, education, and occupational therapy,” certified by the National Council for Scientific and Technological Development (CNPq), led by the first author of this study.

This is a cross-sectional, descriptive study with a quantitative approach (Sampieri et al., 2006), which involved 187 occupational therapists registered with the Regional Councils of Physical Therapy and Occupational Therapy 9, 11, and 13, professional organizations in the Central-West region, active during the data collection period.

It is important to highlight that until 2023, the Central-West region had three councils: CREFITO 9, CREFITO 13, and CREFITO 11, which covered the state of Goiás and the Federal District. However, through Resolution No. 563, on January 27, 2023, by COFFITO, the division of CREFITO 11 began, which now only serves the Federal District, and CREFITO 19 was created with its headquarters and jurisdiction in Goiás (Conselho Federal de Fisioterapia e Terapia Ocupacional, 2024), and its board was approved in May 2024 through ruling No. 728, published in the Official Federal Gazette.

Nevertheless, it is important to note that data collection for this study was conducted before the publication of this Resolution, so the data presented refer to the three Regional Councils in effect at the time (i.e., 9, 11, and 13).

The criteria for participation in the study included professionals with active registration in their respective regional council in the Central-West region at the time of data collection. Exclusion criteria were professionals who responded to the survey more than once and those who did not report to the council in which they were registered. For the study design, a sample size calculation was made with a 90% confidence interval.

Data collection took place from September 2022 to March 2023, in a non-face-to-face manner, through the completion of a form available on Google Forms, addressing sociodemographic profile information (self-identified gender, age group, place of residence and practice, linked CREFITO, region of education, years since graduation, and additional education), employability (place of practice, type of contract, work experience, position, work hours, and professional income), and the characterization of the area of practice (field of practice and target audience).

Participant recruitment was done through the dissemination of information about the study and a link to access it on social media (Facebook, Instagram, WhatsApp), where interested individuals could access the information that helped them voluntarily participate in the study (study details, risk and benefit explanations, access to the Informed Consent Form, and the survey form).

The collected data were organized, quantified, and tabulated in an electronic spreadsheet using Microsoft Office Excel®. The analysis was conducted using simple descriptive statistics, based on absolute frequencies (n) and relative frequencies (%).

Results

The results are presented in tables that provide information on the characterization of the sample (Table 1), the employability and the professional performance of the participating occupational therapists (Table 2). The data reveal that the majority of participants are cisgender women (n=167; 89%), aged between 20 and 29 years (n=71; 38%), who were linked to CREFITO 11, which, at the time of data collection, covered Goiás and the Federal District (n=123; 66%), and who completed complementary training of the lato sensu specialization type (n=123; 66%), as indicated in Table 1 below.

Table 1. Sociodemographic characterization of the sample (n=187).

Variables	N	(%)
<b>Gender</b>		
Cisgender woman	167	89%
Cisgender man	18	10%
I prefer not to identify myself	2	1%
<b>Age range</b>		
20 to 29 years	71	38%
30 to 39 years	54	29%
40 to 49 years	47	25%
50 years or more	15	4%
<b>CREFITO Link</b>		
CREFITO 11	123	66%
CREFITO 13	32	17%
CREFITO 9	32	17%
<b>Place of residence and work</b>		
Distrito Federal (Central-west)	85	45%
Goiás (Central-west)	38	20%
Mato Grosso do Sul (Central-west)	33	18%
Mato Grosso (Central-west)	31	17%
<b>Graduate training region</b>		
Centro-Oeste (Central-west)	131	70%
Southeast	37	20%
North	9	5%
Northwest	6	3%
South	4	2%
<b>Year of graduation</b>		
Up to 5 years	40	21%
6 to 10 years	39	21%
11 to 20 years	60	32%
More than 21 years	48	26%
<b>Complementary training (highest qualification)</b>		
Graduation (including free courses)	26	14%
Graduation (including lato sensu specialization, residencymultidisciplinary and MBA)	129	69%
Master's degree	16	8%
Doctorate	5	3%
None	11	6%

Source: Prepared by the authors using research data.

All 187 occupational therapists who participated in this study provided information on the employability of the profession in the Central-West region. Among them, half work in more than one location (n=93; 50%), 46% (n=87) receive between 4 and 10 minimum wages, and 65% (n=123) work more than 31 hours per week, as shown in the results presented in Table 2 below.

**Table 2.** Characterization of the employability and professional performance of the research participants (n=187).

Variables	N	(%)
Works in more than one location		
Yes	93	50%
No	94	50%
Remuneration (adding up all activities as OT)		
Up to 2 minimum wages	11	6%
Between 2 and 4 minimum wages	56	30%
Between 4 and 10 minimum wages	87	46%
Between 10 and 20 minimum wages	26	14%
Above 20 minimum wages	7	4%
Hours worked (weekly)		
Less than 10 hours	5	3%
11 to 20 hours	17	9%
21 to 30 hours	42	23%
31 to 40 hours	70	37%
More than 40 hours	53	28%
Place of professional activity		
Private network	103	55%
Public network	41	22%
Private and public network	28	15%
Residence	10	5%
Teaching	4	2%
Not yet active	1	1%
Time spent working in this activity		
0 to 11 months	45	24%
1 to 3 years	29	15%
4 to 5 years	18	10%
6 to 10 years	37	20%
11 to 15 years	23	12%
More than 15 years	35	19%
Current hiring modality		
Employee (CLT - celetista)	53	28%
Legal entity (PJ)	32	17%
Autonomous	32	17%
Municipal public servant	24	13%
State public servant	23	12%
Federal public servant	11	5%
Service provider	5	3%
Scholarship	5	3%
Not working at the moment	1	1%
Did not answer	1	1%
Position		
Assistance	162	87%
Coordination/supervision/Technical Manager (RT)	13	6%
Management	4	2%

Table 2. Continued...

Variables	N	(%)
Teaching	4	2%
Consultancy	3	2%
Not yet active	1	1%
Audience served		
Childhood	53	29%
Childhood and adolescence	34	18%
Childhood and adulthood	4	2%
Childhood and old age	4	2%
Childhood, adolescence and adulthood	8	4%
Childhood, adolescence and old age	4	2%
Childhood, adulthood and old age	8	4%
Childhood, adolescence, adulthood and old age	32	17%
Adolescence, adulthood and old age	5	3%
Adulthood	8	4%
Adulthood and old age	16	9%
Old age	8	4%
Others	3	2%

Source: Prepared by the authors using research data.

The data reveal that participants have different types of employment contracts; however, the most cited was the “CLT” contract (n=53; 28%). Moreover, it was found that the majority of participants work in healthcare (n=162; 87%), in the private sector (n=103; 55%), and serve the child population aged 0 to 11 years (n=147; 37%).

It is noted that regarding the category “Public Served,” presented in Tgeneralist andpants were able to select more than one response option, based on the understanding that occupational therapy training guided by the National Curricular Guidelines (DCN) is generalist, and considering the assumption that it is common for occupational therapists to work with more than one population, especially those with recent qualifications. In addition to working with these populations, nine participants reported, in another space for open comments, that they also work with student populations.

Discussion

Characterization of the sample

The sample of this research consists of 187 occupational therapists, most of whom are cisgender women (n=167; 89%). This result reveals the strong presence of women in occupational therapy and reinforces findings from other national and international studies in the field (Krug, 2014; Mariotti et al., 2016; Soares, 2022; Basso et al., 2024; World Federation of Occupational Therapists, 2022; Ned et al., 2020; Chai et al., 2017). This large presence can be linked to the fact that the occupational therapy course is considered a healthcare and caregiving profession, activities socio-historically associated with the female gender, due to the sexist division of labor imposed by a conservative society, despite the growing presence of this group in professional spaces not foreseen by the hegemonic group.

These are young professionals with recent qualifications, as 38% (n=71) of them are between the ages of 20 and 29. In this regard, national and international studies have also pointed out that most occupational therapists are young with recent training (Krug, 2014;



Mariotti et al., 2016; Joaquim et al., 2017; Ned et al., 2020; Soares, 2022). Additionally, data from the Fórum Nacional de Pró-Reitores de Assuntos Comunitários e Estudantis (2019) indicate that people aged 20 or more have increasingly been entering higher education, a fact that may have also resonated with the influx of students in the occupational therapy program in recent years. On the other hand, occupational therapy undergraduate programs in the Central-West region, currently operating, began after 2008, which may have influenced the recent qualifications of the participants in this study.

Regarding the place of residence and work, most participants reported living in the Federal District (n=85; 45%), followed by those residing and working in the state of Goiás (n=38; 20%), and most participants reported being affiliated with CREFITO 11 (n=123; 66%), which covers these two locations. There is a notable participation of professionals from the Federal District, possibly because it is home to the only public university in the Central-West region and where the majority of occupational therapists are registered with the Regional Council of this region.

Still considering the participants' characterization, it was found that most of them (n=131; 70%) graduated from universities in the Central-West region. A study by Mariotti et al. (2016) also pointed out that most occupational therapists in the state of Paraná (Southern region) graduated from institutions in that state (61.2%), revealing that these professionals tend to work professionally in the region where they received their academic training. The fact that the majority of professionals in this research were trained in the Central-West region reinforces the relevance of investments in public universities and the opening of new courses, supported by the REUNI program, as it enables equal access to education and expands the availability of higher education to the population, especially in the Federal District, although there are numerous challenges to retaining students in universities.

Regarding the time since graduation for participants in this study, the sample consisted of professionals with varying lengths of experience, with values close to those of the national scenario, which may be related to the different locations where they completed their degrees. It was also found that, of the 187 participants, only 11 (6%) had not completed any type of further education, and among those who had, the majority pursued a *lato sensu* specialization (including multidisciplinary residencies and MBAs) (n=129; 69%). This result is similar to those found in other national studies from other Brazilian states, which indicate that most occupational therapists who pursued further education did so through *lato sensu* specialization, with only a few opting for *stricto sensu* postgraduate courses (master's and doctorate) (Lins & Monteiro, 2023; Oliveira, 2022; Soares, 2022; Joaquim et al., 2017; Mariotti et al., 2016; Krug, 2014).

Training new researchers is a challenge in Brazil, and it is believed that the small number of professionals with master's and/or doctoral degrees, as revealed by the data presented in this study, is related, especially, to the limited number of available scholarships for incoming students, as well as the low value of these scholarships, which may be less attractive than the opportunities available in the job market. Additionally, students on master's and doctoral scholarships were not allowed to accumulate their scholarship with other sources of income, a restriction that was recently relaxed through Ordinance No. 187, dated September 28, 2023, by the Coordination for the Improvement of Higher Education Personnel (CAPES), which regulated the accumulation of master's, doctoral, and postdoctoral scholarships with remunerated



activities or other incomes. However, the effects of this flexibility, particularly for occupational therapy researchers, are still unknown, and it is suggested that new studies investigate this reality.

### **Characterization of employability and professional practice of the research participants**

The results revealed that half of the occupational therapists in this study work in more than one location, as also pointed out by other national studies in the field (Souza et al., 2018; Soares, 2022; Oliveira, 2022). Soares (2022) addressed the reality of occupational therapists in Sergipe and revealed that working in multiple locations was primarily to supplement monthly income, as salaries at these locations were low, which may also be one of the reasons for the double work shift among occupational therapists from the Central-West region who participated in this study.

Regarding remuneration, when considering all activities as occupational therapists, it was found that 46% (n=87) of the professionals earn between 4 and 10 minimum wages, followed by 30% (n=56) who earn between 2 and 4 minimum wages. A similar reality was observed in other Brazilian states, such as Paraná, where it was found that 55.6% of occupational therapists earned between 2 to 5 minimum wages (Mariotti et al., 2016). Similarly, in Sergipe, 45% of occupational therapists had an income of up to 5 minimum wages (Soares, 2022). It is possible that the remuneration of the participants in this study is related to the time of professional training and the level of education.

Among those who earn more than 20 minimum wages (n=13), a profile of professionals emerges where all of them have more than 10 years of professional experience, all have pursued further education, eight of them have more than one type of complementary education (including short courses, lato sensu specialization, and master's degrees), and most of them work in private clinics and with the child population (n=9; 69%). This suggests a profile of professionals who have followed career-building paths in this area and have invested in further education and service provision.

Regarding the weekly work hours, it was revealed that 37% (n=70) of occupational therapists work between 31 and 40 hours per week, followed by 28% (n=53) who work more than 40 hours per week. Thus, when combining these two categories, it is clear that more than half of the participants in this study work more than 31 hours per week, exceeding the weekly working hours defined for occupational therapists by Law No. 8.856 (Brasil, 1994), which is a maximum of 30 hours. However, as this law does not provide further details on the subject, there are various interpretations about the professional's working hours, especially regarding work accumulation.

Moreover, among those working more than 31 hours per week, totaling 124 (65%), 75 of them work in more than one location, indicating a possible work overload, considering the activities performed as occupational therapists, which may be linked to the need for improved professional remuneration.

The absence of a national minimum wage for occupational therapists leaves the category vulnerable to the offers provided by services, which may not even meet the National Reference for Occupational Therapy Fees (RNHTO) recommended by COFFITO, leading to situations of vulnerability in employment contracts and remuneration.

There are initiatives for establishing a national minimum wage for physiotherapists and occupational therapists, which add a provision to Law No. 8.856 of March 1, 1994, through Bill No. 988 of 2015, which sets the minimum wage at R\$4,650.00 for the category. Currently, the project is in the Constitution and Justice Commission (CCJ) of the Chamber of Deputies, and still requires further procedures, including approval by the Federal Senate and presidential sanction to become law.

Additionally, the minimum wage in the private sector is determined by the Physiotherapy and Occupational Therapy Union (SINFITO) of each state, and some of these unions have set minimum wages for the category, considering the 30-hour weekly workload. For example, the SINFITOs in Tocantins (R\$3,922.00) (Sindicato dos Fisioterapeutas e Terapeutas Ocupacionais do Estado do Tocantins, 2025), Piauí (R\$3,969,52) (Sindicato dos Fisioterapeutas e Terapeutas Ocupacionais do Estado do Piauí, 2025), and São Paulo (R\$4.000,00) (Sindicato dos Fisioterapeutas e Terapeutas Ocupacionais do Estado de São Paulo, 2024) have set such minimum wages. However, in practice, companies may or may not adhere to this recommendation.

The importance of the approval of a national minimum wage that is consistent with the professional activities performed by occupational therapists is recognized. This wage should aim to value the category, meet the professionals' needs, and align with the profession's resolutions, particularly with the labor rights that must be legally guaranteed.

Regarding the place of professional practice, only one participant had not yet started their professional activities, while most participants reported working in the private sector (55%;  $n=103$ ). The most frequently cited areas/places of practice by the participants were: clinics and offices ( $n=85$ ; 45%), hospitals ( $n=32$ ; 17%), home care ( $n=21$ ; 11%), and primary health care ( $n=16$ ; 8%).

These results are similar to those found in international studies on the employability of occupational therapists, such as in Malaysia and South Africa, where the majority of occupational therapists also work in the private sector (Chai et al., 2017; Ned et al., 2020). In contrast, national studies that collected information on the employability of occupational therapists in other Brazilian states (Paraná, Rio Grande do Sul, and Sergipe) revealed that most professionals are linked to public services (Mariotti et al., 2016; Krug, 2014; Soares, 2022).

It is important to highlight that, in Brazil, the Unified Health System (SUS), which offers services universally, free of charge, and accessible to the entire Brazilian population, operates differently from countries that may not prioritize these services for their population. This means that in Brazil, there are public services in different sectors that may involve hiring occupational therapists through public competitive exams.

However, considering Brazil, this is a relevant point because the Central-West region includes the country's capital, known for its large number of public competitive exams, but it appears to offer fewer opportunities for occupational therapists in public health services, social assistance, or education, for instance. Therefore, the lack of positions in the public sector, or even low remuneration, may be some of the reasons for the limited presence of occupational therapists in this sector.

The data from this research allow for reflection on the reality of other states in Brazil, as well as on possible actions to improve investment in opportunities for occupational therapists to be more present in public services, since the National Curricular Guidelines guide the training towards SUS (Brasil, 2002).

Regarding the length of time working as an occupational therapist, it was found that there were participants with various periods of professional experience. Specifically, 24% (n=45) had less than 11 months of experience, thus being recent graduates; 20% (n=37) had between 6 and 10 years of experience; and 19% (n=35) had more than 15 years of experience. Given that the occupational therapy programs based in the Central-West region began their activities in 2008, it is understood that professionals with more experience graduated from higher education institutions in different regions of Brazil, completing occupational therapy programs that started earlier.

Participants were also asked about their current employment type and the position they held during the data collection period. Regarding these two categories, they were allowed to provide more than one response. However, when analyzing the data related to the current employment type, considering all responses and then considering only the first response provided, no significant difference was found in relation to the results of this category. Therefore, for the sake of organizing the data, only the first response provided was considered, as shown in Table 2.

In terms of employment type, it was found that participants reported being CLT (Consolidation of Labor Laws) employees (n=53; 28%), followed by those who are PJ (individual legal entities) (n=32; 17%) and freelancers (n=32; 17%). A recent study conducted in Rio de Janeiro, involving the characterization of 142 occupational therapists working in the Unified Social Assistance System (SUAS), revealed that 50% of these professionals were CLT employees (Basso et al., 2024). In Sergipe, a study involving the characterization of the labor market for 25 occupational therapists revealed that 28% of them had statutory positions, 24% had temporary contracts, 20% were CLT employees, 16% were service providers, and 4% were micro-entrepreneurs (Souza et al., 2018). In Paraná, a study conducted in 2015 revealed that 38.9% of the occupational therapists in the study were CLT employees, 30.8% were statutory employees, and 23.1% were freelancers (Mariotti et al., 2016).

In this context, there is a noticeable difference between the realities of these locations. However, it is possible to understand that the employability of occupational therapists is tied to contemporary labor market demands, as highlighted in the study by Ricci et al. (2023), which pointed out the exponential increase in the assistance to children with autism spectrum disorders, which is mainly associated with care in private services. It is also worth noting that there is a gap in public competitive exams for the health sector in the Federal District, for instance, leading these professionals to be employed under service contract arrangements (legal entities, freelancers, etc.).

On the other hand, the study by Oliveira (2022), which examined the characterization of occupational therapists in relation to their work in the National System for Socio-Educational Care (SINASE), revealed that 65.1% of the professionals had statutory positions. This information suggests a diversity of realities regarding the employment types of occupational therapists in Brazil, highlighting the need for further investigations to clarify these situations.

In any case, the result of this study deserves attention because it reveals a shift in the reality of occupational therapy employment, where a significant number of professionals work in informal jobs with employment types that provide no social protection or labor

rights – such as paid vacation, working hour limits, 13th salary, and retirement. Regarding this aspect, Souza & Lussi (2022, p. 6) assert that informal work “neglects the importance of social protection and workers’ rights guaranteed through formal labor contracts.” Therefore, it is crucial to reflect on and reconsider these possibilities so that professionals’ personal and professional needs can be met and recognized by the state, prioritizing safe, dignified, and healthy work.

Regarding the position, it was found that 87% (n=162) of participants work in assistance. As previously mentioned, participants were allowed to provide more than one response for this category. Upon analyzing the data and considering all responses, it was found that 62 participants held two or more job positions. Additionally, it was identified that 162 participants work in assistance, 50 in coordination/supervision/technical responsibility roles, and 28 in management/administration roles. A similar reality was revealed in the study by Chai et al. (2017), who found that 59 (72%) of 82 occupational therapists from Malaysia were employed in clinical roles.

This result reveals that occupational therapists from the Central-West region of Brazil who participated in this sample mainly work in assistance roles, but there is also a significant number of professionals in coordination/supervision/technical responsibility and management positions in the region. This scenario was expected due to the growing number of private clinics in the region, particularly for assisting children with autism spectrum disorders. Furthermore, the results obtained highlight the areas that employ the most occupational therapists, but also point to the importance of considering the training of occupational therapists for specific positions, such as in management.

Additionally, the present study revealed that the most common client group served by the occupational therapists who participated in this study is children (ages 0 to 11), as indicated by 147 (79%) of the 187 participants. It is important to note that in this category, participants could indicate more than one client group, meaning that some participants reported working with more than one client group, including children, adolescents, adults, and the elderly. Even when working with multiple groups, most participants still serve the child population.

There are various possibilities for occupational therapy practice with children, including practices coordinated with the family and school to achieve goals focused on the child. These may involve demands related to play, school learning, social participation, rest and sleep, performing activities of daily living, and instrumental activities of daily living, among others (Gomes et al., 2021).

Folha & Della Barba (2020) highlight that occupational therapists have important tools for working with children and are strongly involved in these practices, considering the occupations performed by these individuals, especially in relation to play, which is considered the primary occupation of children. This also includes actions related to participation in school, at home, and in the community.

There is a clear demand in the region for professional work with children, which may be linked to broader factors, such as the increasing diagnoses of neurodevelopmental disorders and the boost provided by the promotion of the work done by occupational therapists using sensory integration techniques, particularly aimed at children. This may also be tied to the growing visibility of the profession, which has become increasingly well-known by the public, especially among teachers working with children, or due to the increased access to information through social media.

## Final Considerations

The study revealed that the profile of occupational therapists in the Central-West region consists mainly of young women working in private-sector services under the CLT (Consolidation of Labor Laws) employment model. They have a monthly income between 4 and 10 minimum wages and primarily work with children.

It is emphasized that this study reached a significant number of participants and revealed a reality regarding the employability of occupational therapists, offering pathways for further reflection on the topic. Among the findings, there is a clear need for expanding opportunities for occupational therapists to enter public services, as well as the importance of establishing a minimum wage, which could contribute to better remuneration and, possibly, reduce job accumulation and multiple roles.

The study raised some suggestions for future research, including: replicating this study with strategies to increase participation from more professionals, including those who are no longer working in the profession, to better understand the paths taken and the reasons for stepping away from the profession; further exploration of working as a legal entity or freelancer to understand the challenges of these employment types; and gaining a better understanding of where occupational therapists work to gain insight into which services hire the most professionals and which are experiencing a shortage.

This study did not exhaust the possibilities of information to be analyzed regarding the reality of professionals in the Central-West region. Therefore, it is suggested that new studies seek to deepen the information identified here, providing a better understanding of the profession's reality in the region. These data could contribute to improvements in the graduate and continuing education process for occupational therapists.

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