Post-colonial occupational therapy: Perspectives from an old empire[1]

Terapia Ocupacional Post-Colonial: Perspectivas desde un viejo imperio

Nick Pollard[2]

Abstract: This article explores post colonialism from the experience of a white middle class British professional who grew up in the 1960s at the end of the colonial era. In it, I will give a narrative based in personal experience of how this period and its influences impacted on my development as an occupational therapist, applying a 3P archaeological process: Personal, Political, and Professional, a simple tool for identifying a critical position. Parts of Europe are experiencing a postcolonial phenomenon of population diversity which has become the focus of increased attention following migrant crises from conflict and instability in Northern Africa and the Middle East, as well as serious inequalities in opportunity. Many of these people have experienced considerable psychological as well as physical trauma, in addition to any other health issues they may have acquired. Clinical conditions cannot be seen in isolation from the complex social and cultural environments in which they arise. This presentation will not assume to propose solutions, but will conclude with some proposals about developing collective actions through which occupational interventions can be inclusive, and which can take some inspiration from the epistemologies of the south.

Key words: colonialism, health, migration, collectivism, occupation.

Resumen: Este artículo explora el post colonialismo desde la experiencia de un profesional británico blanco que creció en la década de los sesentas, al final de la época colonial. Utilizo una narrativa basada en la experiencia personal de cómo este período, y sus influencias, han afectado mi desarrollo como terapeuta ocupacional, a través de la aplicación del proceso arqueológico 3P: Personal, Político y Profesional, como una herramienta sencilla para identificar una posición crítica. Partes de Europa están experimentando un fenómeno post-colonial de diversidad poblacional, el cual se ha convertido en un foco de atención cada vez mayor a raíz de las crisis migratorias causadas por conflictos e inestabilidad en el norte de África y Medio Oriente, así como de graves desigualdades en oportunidades. Muchos de estos migrantes han experimentado traumas psicológicos y físicos considerables, además de otros problemas de salud. Las condiciones clínicas no pueden ser vistas de forma aislada, sino ligadas a los entornos sociales y culturales complejos en los que surgen. Desde hace algún tiempo se ha hecho evidente la necesidad de que profesiones como la Terapia Ocupacional desarrollen habilidades para trabajar con diferentes personas y de reflejar la diversidad de la población.

[1] Este artículo se deriva de la ponencia presentada por el autor el 4 de marzo de 2016 en la ciudad de Medellín, en el marco del XVI Congreso Colombiano de Terapia Ocupacional.

[2] Terapeuta Ocupacional. Máster en Psiquiatría, Filosofía y Sociedad. Magíster en Terapia Ocupacional. Doctor en Terapia Ocupacional. Profesor Titular Facultad de Salud y Bienestar. Sheffield Hallam University. Sheffield, Reino Unido. N.Pollard@shu.ac.uk

Esta presentación no pretende proponer soluciones, pero concluye con propuestas sobre el desarrollo de acciones colectivas a través de las cuales las intervenciones ocupacionales pueden ser incluyentes, inspiradas en las epistemologías del sur.

Palabras clave: colonialismo, salud, migración, colectivismo, ocupación.

Introduction

The root of the word occupation is *occupacio*, to seize or take possession (Yerxa, 2000). The possession of territory is not only a human instinct, but one shared with many animal species, who will defend territory and have a concept of it. In the personal element of the 3P process (Pollard, Kronenberg & Sakellariou, 2008), I can explore some early narratives of how my concept of occupation was formed.

As a small boy I grew up in the village of Borough Green, in Kent, in the south east corner of the United Kingdom (UK). When I was 7, my 1926 school atlas featured a map of the British Empire in which roughly a third of the word was coloured pink. My teacher told us to be proud that so much of the world was 'ours'. To me, this was amazing, and of course at seven years old the ideological implications were never realised. Although of course there were class differences, the community I lived in then was very homogenous, in which everyone was white. Nearly 50 years later the crowd I might mingle with is much more diverse racially and culturally.

Since the 1950s institutions such as the National Health Service employed many workers from the common wealth countries amongst its doctors and nurses (Ramdin, 1987). Howev-er, occupational therapy, as a profession which aims to serve the needs of this diversity, is still predominantly a white, female and more or less middle class profession in the UK (Owens, *in press*). This is recognised by some commentators, but as Beagan & Chacala (2012) point out, even where it is acknowledged the assumption is that the differences are the experienced by the dominant professional rather than the person who is considered to be divergent. Given that occupational therapists are very much a minority profession this may be paradoxical. I believe this has to change, and soon.

Colonialism is a manifestation of power and inequality, through the explotation of populations, their land and their environments for their economic resources. In the post colonial relationship, people from exploited countries come to the lands of their colonisers to find the wealth that was extracted from their ancestors. This is clearly an issue of occupation, but not one taught as part of an occupational therapy curriculum. Perhaps the connection of a post colonial understanding of the term occupation with that of therapy is confusing. It is time to think over what the occupational adjustments have been, what the occupational and historical narrative of that experience is, and how it might work out in the future.

Britain's postcolonial legacy really came home in the period after the Second World War, and is still coming home. The war left the UK heavily indebted to the USA (Ferguson, 2004). Its new Labour administration could not afford both global empire and the domestic welfare state promised to the UK electorate. As the welfare state structures came into being Britain began retreating from its possessions and the commonwealth was developed, a linked partnership between formerly dependent states.

Many commonwealth citizens from former Empire dominions came to work in new state services such as the railways or the National Health Service (Ramdin, 1987). Post war migration has significantly changed UK culture over the last 50 years. Popular music has incorporated different cultural influences, British cooking is no longer a mess of overcooked stodge, and British literature has many new and diverse voices. British life is entering a period of fusion – not without some conflict. The differences are evident within a lifetime – within my lifetime. The relationships which result from this combination of cultures are complex and diverse, they are certainly not a multicultural homogeneity, or a zombie multiculturalism (Gilroy, 2012) which excludes ideas of difference, particularly failing to recognise racial difference (Lentin & Titley, 2012).

There are now many ways in the UK to 'do, be, become and belong' as Wilcock might say. The world is here with every cuisine and every language you can think of. In Slough some of the street signs are in Polish. In Lin-colnshire there are posters in Portuguese reminding agricultural workers of their rights. Cultural diversity is complex, not simply black and white. Lily Owens (*in press*) points out that the problem of a white middle class cultural dominance, and its marked dominance in the occupational therapy profession, is that of 'seeing white' (Nelson, 2007). Rather than being blinkered, occupational therapists need to critically examine the evolution of this dominance (Hammell, 2009, 2011) or risk what Guajardo (2011, 2013) calls "professional narcissism".

Inequality is a key issue affecting life in the UK. The social world of the 1950s was an unequal one in which class divisions were marked, but the range of incomes appears to have been narrower than the trend for inequality which has generally increased since the 1970s (Taylor-Gooby, 2013). Many of the people who migrated to the UK in the intervening years to find work could earn better money than in their home countries, but from the beginning they were often excluded from white society and had to establish their own networks (see Sevlon, 1956). Today 7.5 million people in England and Wales originate overseas, making up 11.9% of the 13% of the population with an ethnic minority background (ONS, 2015). While these proportions are fairly average for European states these populations tend to be younger, have lower status and less secure jobs, income and housing, less access to education. This combination of inequalities is reflected in poorer health outcomes (Lee, Sissons & Jones, 2013).

Through diversity the dynamics of society are becoming more complex. Social class and social capital do not operate along simple stratifications. The economic changes of the post-war period have also produced new social positions. Savage et al. (2013) found that at one end of UK society there is an elite class, and at the other a "precariat" of people on benefits, with very little money. The working class, formerly a significant group, now represents only 14% of the population. Occupational therapists are part of the 'established middle class', a group representing 25% of the population, including many other health professionals (Savage et al., 2013). Although another study found that majority of British people *perceive* themselves as working class (Taylor-Gooby, 2013), the established middle class has a significant dominance in the hegemony of health and social systems, and a position in the most numerous class, with substantial social cultural capital. It is a powerful influence, and as like to see the world as replicated in itself rather than to take a critical examination of its power and lack of diversity (Beagan & Chacala, 2012; Owens, *in press*). This would coincide with a government policy of relative cultural values, about what is acceptable and what is not. The result would not be a negotiated way of living, but a demand for conformity to what Lentin and Tilley (2012) term a *leitkultur* - zombie multiculturalism, that avoids critical discussion of difference.

Growing up

My generation, born in the late 1950s, grew up in a period of affluence that lasted until the 1970s. My parents, born in the 1930s, were the first generation in their working class families to obtain higher education in the post war welfare state. This economically difficult period none the less reaped its economic benefits from previous years of empire and colonialism. Many of the things that enabled an ordinary life and sustained everyday occupations were the products of this relation with the rest of the world. It did not occur to us that so many of the cultural attributes of that way of life, from the baked beans to the cups of tea, from the sugar and fruit in an English tea cake to the willow pattern china crockery it was all served on, were originally very un-English. However, in much UK occupational therapy intervention this monoculture prevails. Assessing the capacity to make a cup of tea in the occupational therapy kitchen is a frequent determinant of whether a person who experiences dementia or has had a recent stroke can be discharged home. The cultural implications of this assessment have been documented by Fair and Barnitt (1999), who found in their office alone that there were over 16 different ways to make a cup of tea.

In the late 1960s my parents divorced and my brother and I moved to Swindon, a large industrial town west of London, surrounded by the ancient remnants of prehistoric culture. It was here that I began to encounter people from cultural minorities. Once a turban wearing Sikh bus conductor pulled a Scalextric catalogue from my hands saying to my astounded face *'yes, our children like these things too, you know'*. He flicked through it and returned it to me. It was a brief, but

important cultural lesson. Other people live their lives just like us.

As the UK sank into economic decline during the late 1970s, racism began to increase (Witte, 2014 [1996]). It was acceptable, part of the culture: racial jokes and stereotypes were even included in children's television, but this sat awkwardly with other aspects of the popular culture of the time. I began to feel uncomfortable, and my white certainty (Owens, *in press*) was challenged. I was attracted to a racist notion of patriotism, but at the same time enjoyed the music of Desmond Dekker, Tamla Motown, and Bob Marley. I had to recognise that even the British artists I liked were borrowing wholesale from Black American musicians.

A further change, that of attending full time polytechnic education was to question all that much further. The advantages of free higher education enabled me to have a reason to move away from home and gain my independence earlier than my friends who left school to work. I went to Sheffield, a large northern city, where I mixed with many students from different countries. The isolated perspective which I had grown up with was confronted with diversity and this awakened the political aspect in my 3P archaeology. I became involved in protests, particularly against the rising fascist National Front, which preyed on popular fears about migration.

In the 1980s I moved to Stoke Newington, a deprived and culturally diverse area of London. I became involved in the community publishing and worker writers' movement, the Federation of Worker Writers and Community Publishers (FWWCP) and joined a local workshop at Centerprise, a radical bookshop. I was a member of the FWWCP for nearly a decade before becoming an occupational therapist. Writing, sharing and publishing our narratives of working people and the communities we lived in was an absorbing occupation, intended to get people to think critically about the importance of the immediate things they did in their daily occupational lives.

These narratives of community and their publication was a revelation to me. My polytechnic idealist Marxism was knocked into touch in the robust debates which I encountered in this grass roots movement, full of contradictions and unresolved issues concerning race, culture, disability, sexuality and gender as well as politics, with a creative and experimental element to it (Morley & Worpole, 2009). It included anyone, from people who could not read and write to university lecturers. I learned things about history and culture that you could never learn in formal education. I was exposed to writers like Louise Bennett (1966), Samuel Sevlon (1956) and Benjamin Zephaniah (1985) who used Caribbean idiom to challenge conventional expression. Another rich literature which this movement exposed me to was Irish writing, through books such as Ó Tuama and Kinsella's (1981) *An Duanaire, 1600-1900: Poems of the Dispossessed*. In the late 1500s Ireland became England's first colony, and its experience shaped all that was to follow in the next 400 years. This book traced the change of focus

in the bardic tradition from an exiled Celtic nobility to the situation of a dispossessed and colonised people. My father had already introduced me to English folk music, another buried culture, and much of what I encountered in these other literatures with strong oral elements rekindled my interest in this too.

FWWCP workshops tended to be inclusive. Often the writing they produced had a political edge about the immediacy of community life, and black writing became increasingly confident. When I later researched what people obtained from this movement, a key finding was that people enjoyed meeting others whom they would not have otherwise encountered (Pollard, 2010). The experience went against the prevailing norms in UK society of people rubbing shoulders with each other but not actually mixing socially. We stayed at each other's homes and ate each other's food, partied together and argued together. Above all else, it opened my eyes and ears to the cultural possibilities of the Britain I had grown up in.

Culture and occupation

All this had a profound impact on the professional element in my 3P archeology. When I trained as an occupational therapist in the late 1980s, I was surprised to find that the clinical and medical understanding of occupation being developed in the profession did not then include a community understanding of shared occupational knowledge. The FWWCP's tacit and vernacular sources derived from voicing direct experience were unknown.

This lack of perspective is indicated by other occupational therapy writers such as Hammell (2004) and Beagan (2007, 2012). For me it is really important. I feel that I learned about human occupation as a transformative practice through the FWWCP, based in Paulo Freire's (1972) ideas about education and democracy, of conscientization through the shared exploration of social contradiction, which reflects Lily Owens critique of '*seeing white*'. Occupational therapists might call this reflective practice based on experiential narratives. As FWWCP members, our practice of shared narratives took place outside the cultural and pedagogical frames of reference, in a space and with ground rules that we had negotiated amongst ourselves. This was very exciting to me, because it tried to draw strength from the shared and critical exploration of differences of gender, culture, disability, and of literacy: any form of human experience.

I regarded this experience as a vernacular university, a tremendous opportunity. We were probably no more numerous than many of the other small political movements of the time but we were not hampered by ideology (Stanley, 1997; Morley & Worpole, 2009). These people encouraged me to read writers I would never had looked at; to editing the FWWCP magazine *Federation*, informed my use of writing groups as an intervention medium, and set me off onto the journey that led to writing and editing occupational therapy books. These books owe something to the FWWCP tradition in trying to include new writing and represent diverse narratives of

occupation and communities (Pollard & Sakellariou, 2014; Pollard, 2016).

This smorgasbord of cultural possibilities also contained many very uncomfortable lessons. UK communities contain people from all over the world with whom at some point the country has had a colonial relationship. Many different groups have a story of colonial oppression. The need to reclaim origins through the significance of language and its relationship to power was very significant in the community publishing movement. People were discovering their dialects and using them to write with instead of the Queen's English. Black poets were writing in patois, and there were even white working class kids trying to express themselves in patois too. This might seem incongruous, but it was a search for authenticity, in which we, as FWWCP members, were all engaged. It was about rediscovering identities, or making them, or at least claiming them as different to the dominant cultural identity.

This was not merely rebellious adolescence. Some people could talk about how they had experienced a life of cultural oppression, often dismissed by the education system, or denied their identity (e.g. Smart, 2005). As Morley and Worpole's (2009) book about the worker writer movement revealed, these were the voices of people and communities which had been written out of the culture, or outside the culture. Nor could it often be recognised as culture. Coming from the vernacular and the tacit forms of working class knowledge rather than an academic socialist discourse, it was

to be dismissed as of little value, as being only therapeutic, or as atheoretical. In *Keywords*, Raymond Williams (1983) describes community as having no negative connotations. With the poverty from the high unemployment of Thatcher's 1980s and the 1990s Charles Murray (1990) identified an underclass of entrenched dysfunctional poverty, which later became Cameron's 'broken communities'. If anything, current economic and social policy in the UK is hardening these differences and exclusions with in groups and out groups drawn up along the lines of inequalities, not a new concept but one which has resurfaced (Taylor-Gooby, 2013; Pantazis, 2016). Occupational therapy's emergence during the early 20th century was in part a response to anxiety about the health consequences of deep social inequalities in industrial societies (Frank & Zemke, 2008) which has resurfaced at the end of the 20th century in the form of occupational justice (Townsend, 1998; Stadnyk, Townsend & Wilcock, 2010).

As a concept, occupational justice was a response to arguments around the rationing of health and social care resources which presented ethical dilemmas for occupational therapists (Townsend, 1998). The concept of occupational justice became a question of rights to meaningful activity (Stadnyk, Townsend & Wilcock, 2010), but the teaching is largely divorced from the experiences of people in the communities, a similar problem to the oversights that Beagan (2007, 2012) and Owens (*in press*) identifies. Occupational therapists develop a representative case study or else

consider extremes as a starting point for an argument, they do not consider these narratives as told by these people themselves. The humdrum everyday nature of inequality as it is experienced, is reconstructed by professionals and academics who have the privilege of defining terminologies.

My peers in the Federation of Worker Writers and Community Publishers would not tolerate this, because no one could tell their story but them. If they could not write it down, you would have to write it down for them, and then read it back to them to make sure that you had not added anything, or left anything out (Smart, 2005). This is a collaborative first principle for post-colonial encounters, but not one for which occupational therapists are always renowned for respecting, for example in research (Hammell, Miller, Forwell, Forman & Jacobsen, 2012).

Occupation and colonisation

The problem of colonialism in occupational therapy lies in that encounter where someone's story becomes a neat case study. In establishing *ourselves* as the experts on disability without permission that representation is misrepresentation, because that personal narrative is someone's intellectual copyright. A post-colonial approach from the occupational therapy profession implies a transitional process which explores cultures, narratives, exchanges and requires open minds (Block, Kasnitz, Nishida & Pollard, 2015). Whiteford and Townsend (2011) talk about participatory occupational justice but such an approach is often hard to enact, and beset with barriers. In participatory research, the problem often is that the participants do not often get the same benefits from participating as the other researchers. They do not have the job security of academic posts, or the connections to represent themselves at conferences with an equality of recognition.

The political lesson for my 3P archeology of this experience is that occupational therapists need to think critically about the processes through which they work with others holistically. These processes have ramifications beyond the clinical. In community publishing people take control of the dissemination of their ideas work on them together, because they are 'local publics' and, as they might argue '*because we live here*' (Goldblatt, 2007). While they can share their ideas very effectively within a small community it becomes very difficult to reach a wider audience, or develop wider participation. A critical community and the communities of critical discourse are often separate entities, with separate distributions and dissemination systems.

Occupational therapists must question what their position in the struggle represents (Owens, *in press*) and how to disseminate what they uncover. This process takes a lot of energy and organisation to work with professional bodies and publishing companies and yet, maintain an integrity which respects all participants and their needs. The price is, sometimes, a compromise about access and affordability in order to attain the means of publication and distribution of ideas through commercial markets for books and research.

For me, these issues resonate with the narrative themes that could be derived from the experience of community publishing and worker writing. The occupational therapies without borders and associated books (Kronenberg, Simo-Algado & Pollard, 2006; Pollard, Kronenberg & Sakellariou, 2008; Kronenberg, Pollard & Sakellariou 2011; Pollard & Sakellariou, 2012; Sakellariou & Pollard, *in press*) were an attempt to begin to bridge some of these access and representation issues and exchange some of these histories. We tried to pursue a similar objective in the team which produced *Occupying Disability* (Block et al., 2015). Occupational therapies without borders sounds like a romantic and even charismatic identity. When this term was first discussed I was anxious that it might suggest an impossibly aspirational association with *Medecins Sans Frontiers*. However, a local plumber had called his business 'plumbers without borders'. I was reassured: to be without borders is very ordinary, an everyday life experience. Yet, developing a new chapter, or even a whole new text for occupational therapy, requires the discovery of an appropriate language for a post-colonial practice. Even in English, occupation does not translate well across all cultures, and the language of occupational science is difficult, indeed it may not be the narrative form that allows other forms of expression to come to the fore. Sometimes a radical breach is required. Ngugi wa Thiongo (2009) decided that he would no longer write in English, the colonial tongue, but in his own language, *Gkikuyu*, asserting his post-colonial identity. It is also an occupational identity, for the gift of a mother language is in the concepts which are unique and untranslatable and hold truth in its particular context, rather than one imposed on it (Ikiugu & Pollard, 2015).

Thus consensus is not without difficulty, the desire to share practice and value it, is offset by the problem that concepts cannot always be reduced into the terms of other languages or communities. Practically speaking, such work is often done for the love of it. Translation costs are very expensive. Academic communities, such as university faculties, rarely value the production of books over research money. Educating the professions is a business. As occupational therapists without borders we sometimes have to work underground (Stouffer, *in press*), below the radar, working where we can with what we can manage.

This space without borders can be difficult to inhabit, but in this underground network, this community, we are free to develop new occupational therapies. In countries like the UK, with their newly complex cultural communities, we are discovering needs that are familiar to people working in the southern hemisphere. From editing our first book it was evident that southern epistemologies have been addressing these issues for a long time, but in other languages than English, drawing on philosophies and concepts that are rarely touched on in the more clinical focus of English occupational therapy education. In the 1950s and 1960s, occupational therapy was exported as part of the colonial economic and ideological

package to the health systems of the southern hemisphere. In some of those countries it has undergone a transformational experience. When problems are explored in an occupation based analysis, they are clearly more than a clinical problem; not an occupational dysfunction, but dysfunction impacting on the right to occupation, and that dysfunction is connected to wider problems in the community, the economy and inequalities, and the world. This demonstrates a need for advocacy as well as for health intervention, and the fact that both are interlinked is, as Aida Navas (2015) says, one of the paradoxes of the profession. The solution to those problems probably begins with addressing something around differences in the community.

The rapid effects of community change produced by migration, without sufficient support into areas which have already experienced intergenerational poverty and deprivation, are spilling out into parts of the social fabric which hitherto were unaffected. There are increasing numbers of beggars. There are groups of young people on the street with nothing to do, and they are creating a groundswell of discomfort across Europe. The possibility that new groups might threaten the host culture has been consistently exploited by far right racist groups, and these have become frequent scenes in some cities and towns across the UK, where there are more migrants or high numbers of mostly Muslim people, often in the most deprived areas of the country. There has been an increasing concern about significant problems amongst white working class people (whether English, Welsh, Scots, or Northern Irish), which have not been addressed, and there is a dangerous idea that they have been chronically left behind in favour of the new arrivals (Evans & Tilley, 2015). Now, however, in the post 9/11 world, with terrorism being associated with the current migrant crisis from Syria, North Africa, and Afghanistan, and at the same time, the evident difficulty of cultures trying to live together but with very different values, many more people are becoming intolerant; and this includes people from previous migrations, who have become successful but, see their position as threatened.

The movements of impoverished generations can be traced from the industrial age into the post industrial age following traditional paths in inequality, but the scale has moved from internal migration to global migration. These are many of the people who come along to the Accident & Emergency departments in the NHS whose needs are not met because they do not speak English. I will not assume to project these issues onto Colombia, but a quick review of recent literature shows some potential parallels: migration to the cities (although this is in response to internal conflict), and rising inequality. Some of Colombia's specific experiences, -over a half century of internal conflict, very high internal displacement, the impact of colonial legacies on racial and ethnic diversity, and land rights issues in rural areas-, would mean regarding any apparent correlations with caution (e.g. Lucumí, Gómez, Brownson & Parra, 2014; Melo, 2015). As García Ruiz (García- Ruiz, González, Carrillo-Araujo & Cobos-Baquero, 2008; in press) and

others have written, these issues have led to policy approaches which are focused on meeting a diversity of population needs.

Occupational therapy has a key task, which is about the assertion of the value of occupational identity through a shared narrative of doing, the fundamental aspect of occupational participation (Law, 2002). We have not really begun. Britain is only a small country, but increasingly it reflects what is happening in the rest of the world, rather than imposes itself on the rest of the world. The inequalities we see evidently within the UK are reflective of the bigger issues of opportunity and injustice, which are a major concern in occupational therapy literature.

A post-colonial occupational therapy has to be realised through action for change. Much of the pressure the profession is building for change is being worked out through examples of practice. Recent research shows the increasing focus on cultural awareness in Latin American occupational therapy programmes and its results on students (Castro, Dahlin-Ivanoff & Mårtensson, 2016). There are insufficient occupational therapists globally to acquire a critical mass for transformation. The profession has to develop its diversity, rather than reflect the narrow dominance of a white middle class. Sharing and exchanging is a key part of a transformational practice which both realises the global scale of the idea of occupation as doing, yet translates this into the narratives of local practices and idioms.

Occupation is a greater concept than the profession itself because it is a ba-

sic right. What occupation concerns is everyone to determine as people, irrespective of our histories but with sensitivity to our narratives (Galhiego, 2011). A key message I brought home from the XVI Colombian Occupational Therapy Congress was the significance of an occupational base in a strong culture of identity. Occupation can build bridges between divided communities, create synergies and collaboration for meaningful life qualities and health, and promote healthy and sustainable bonds within communities. These might be occupational therapies without borders, but thinking of a human right as focus for a therapy indicates the scale of the challenge, when occupation is something that we all do naturally with whatever we have to hand. This is more than a clinical intervention; it is part of a social expression. What we might be calling on is not the clinical principle, but the transformational principle in the professional narrative. I haven't given many examples; those are for everyone to develop together.

References

Beagan, B.L. (2007). The impact of social class: learning from occupational therapy students. *Canadian Journal of Occupational Therapy, 74(2),* 125-33.

Beagan, B.L., & Chacala, A. (2012). Culture and diversity among occupational therapists in Ireland: when the therapist is the 'diverse' one. *British Journal of Occupational Therapy, 75(3),* 144-151.

Bennett_Coverley, L. (1966). *Jamaica Labrish*. London: Harper Collins

Block, P., Kasnitz, D., Nishida, A., & Pollard, N. (Eds). (2015). *Occupying Disability: Critical Approaches to Community, Justice*

and Decolonizing Disability. New York: Springer

Castro, D., Dahlin-Ivanoff, S., & Mårtensson, L. (2016). Development of a Cultural Awareness Scale for Occupational Therapy Students in Latin America: A Qualitative Delphi Study. *Occupational Therapy International*. DOI: 10.1002/oti.1424.

Evans, G., & Tilley, J. (2015) The new class war: Excluding the working class in 21st-century Britain. *Juncture*. 21(4), 298-304.

Fair, A., & Barnitt, R. (1999). Making a Cup of Tea as part of a Culturally Sensitive Service. *British Journal of Occupational Therapy,* 62 (5), 199-205.

Ferguson, N. (2004). *Empire: The Rise and Demise of the British World Order and the Lessons for Global Power.* Basic Books.

Frank. G., & Zemke, R. (2008). Occupational therapy foundations for political engagement and social transformation. In: N. Pollard, D. Sakellariou, F. Kronenberg. (Eds.) *A political practice of occupational therapy (*pp. 111–36). Edinburgh: Elsevier.

Freire, P. (1972). Pedagogy of the oppressed Harmondsworth. *UK: Penguin*.

Galhiego, S. (2011). What needs to be done? Occupational therapy responsibilities and challenges regarding human rights. *Australian Journal of Occupational Therapy,* 58(2), 60-6.

Garcia-Ruiz, S., González, M.S., Carrillo-Araujo M.V., & Cobos-Baquero, A.M. (2008). Cuadernos de Discapacidad y Rehabilitación Basada en Comunidad. Bogotá: Secretaría Distrital de Salud, Dirección de Salud Pública.

García-Ruiz, S. (in press). Occupational Therapy in a Glocalized World. In D. Sakellariou, N. Pollard (eds.) *Occupational Therapies Without Borders: integrating justice with practice, 2e*. Edinburgh: Elsevier Science.

Gilroy, P. (2012). My Britain is fuck all' zombie multiculturalism and the race politics of citizenship. *Identities: Global Studies in Culture and Power.* 19(4), 380-397.

Goldblatt, E. (2007). *Because we live here: Sponsoring literacy beyond the college curriculum*. Hampton Pr.

Guajardo, A. (2011). Construcción de identidades, episteme y prácticas en Terapia Ocupacional en América Latina. In: Congresso Brasileiro de Terapia Ocupacional, 12.; Congreso Latinoamericano De Terapia Ocupacional, 9. São Paulo: ATOESP.

Guajardo, A. (2013). Terapia Ocupacional: apuntes de una historia inconclusa. In: Congreso Chileno de Terapia Ocupacional, 1.; Jornadas Nacionales De Terapia Ocupacional, 8., Viña del Mar: Colegio de Terapeutas Ocupacionales de Chile.

Hammell, K.W. (2004). Dimensions of meaning in the occupations of daily life**.** *Canadian Journal of Occupational Therapy,* 71(5) 296-305.

Hammell, K.W. (2009). Sacred texts: a sceptical exploration of the assumptions underpinning theories of occupation. *Canadian Journal of Occupational Therapy*, 76(1), 6-22.

Hammell, K.W. (2011). Resisting theoretical imperialism in the disciplines of occupational science and occupational therapy. *British Journal of Occupational Therapy*, 74(1), 27-33.

Hammell, K.W., Miller, W.C., Forwell, S.J., Forman, B.E., & Jacobsen, B.A. (2012). Sharing the agenda: pondering the politics and practices of occupational therapy research. *Scandinavian Journal of Occupational Therapy*, 19, 297–304**.**

Ikiugu, M., & Pollard, N. (2015). *Meaningful living through occupation*. London: Whiting and Birch.

Kronenberg, F., Simo-Algado, S., & Pollard, N. (Eds.). (2006). *Terapia Ocupacional Sin*

Fronteras - aprendiendo del espíritu de supervivientes. Madrid: Panamericana.

Kronenberg, F., Pollard, N., & Sakellariou, D. (Eds.). (2011). Occupational therapies without borders: Towards an ecology of occupation-based practices (Vol.2). Edinburgh: Elsevier Science.

Law, M. (2002). Participation in the occupations of everyday life, 2002 Distinguished Scholar Lecture. *American Journal of Occupational Therapy,* 56, 640–649.

Lee, N., Sissons, P., & Jones, K. (2013). *Wage inequality and employment polarisation in British cities*. London: The Work Foundation.

Lentin, A., & Tilley, G. (2012). The crisis of 'multiculturalism' in Europe: Mediated minarets, intolerable subjects. *European Journal of Cultural Studies* 15(2), 123–138.

Lucumí D.I., Gómez, L.F., Brownson R.C., & Parra, D.C. (2014). Social capital, socioeconomic status, and health-related quality of life among older adults in Bogotá (Colombia). *Journal of Aging and Health,* 27(4), 730–750.

Melo, J.B. (2015). The intersection of race, class, and ethnicity in agrarian inequalities, identities, and the social resistance of peasants in Colombia. *Current Sociology,* 63(7), 1017–1036.

Morley, D., & Worpole, K. (Eds.). (2009). *The republic of letters* (2nd ed.). Philadelphia: New Cities Community Press/Syracuse University Press.

Murray, C. (1990). *The emerging British underclass*. London: Institute of Economic Affairs, Health and Welfare Unit.

Navas, A. (2015) Palabras de Aida Navas durante el celebración de los 45 años de egreso del primer grupo de terapeutas ocupacionales de la Universidad Nacional de Colombia. *Revista Ocupación Humana,* 15(1), 48-54.

Nelson, A. (2007). Seeing white: a critical exploration of occupational therapy with indigenous Australian people. *Occupational Therapy International*, 14(4), 237-255.

Office of National Statistics. (2015). *2011 Census analysis: Ethnicity and religion of the non-UK born population in England and Wales: 201.* Retrieved from: http://www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/ethnicity/articles/2011censusanalysisethnicityandreligionofthenonukbornpopulationinenglandandwales/2015-06-18

Ó Tuama, S., & Kinsella, T. (Eds.). (1981). *An Duanaire, 1600-1900: Poems of the Dispossessed*. Portlaoise, Ireland: Dolmen.

Owens, L. (in press). Our professional existence *is* political: critical reflections on 'seeing white' in occupational therapy. In N. Pollard, D. Sakellariou (eds.) *Occupational Therapies Without Borders: integrating justice with practice, 2e*. Edinburgh: Elsevier Science.

Pantazis, C. (2016). Policies and discourses of poverty during a time of recession and austerity. *Critical Social Policy,* 36(1), 3–20.

Pollard, N., Kronenberg, F., & Sakellariou D. (2008). A political practice of occupational therapy. In Pollard, N., Sakellariou, D., & Kronenberg, F. (Eds.) *A Political Practice of Occupational Therapy*. (pp. 3-20). Edinburgh: Elsevier/Churchill Livingstone.

Pollard, N. (2010). Occupational narratives, community publishing and worker writing groups: Sustaining stories from the margins. *Groupwork*, 20(1), 9-33.

Pollard, N., & Sakellariou, D. (Eds.). (2012). *Politics of Occupation-Centred Practice*. Oxford: Wiley.

Pollard, N, & Sakellariou, D. (2014) The occupational therapist as a political being. *Cadernos Terapia Ocupacional da UFSCar*, 22(3) 643-652.

Pollard, N. (2016). A narrative of cultural occupational performance. *Cadernos Tera-*

pia Ocupacional da UFSCar, São Carlos, 24(1), 191-203.

Ramdin, R. (1987). *The making of the Black working class in Britain*. Aldershot: Gower.

Sakellariou, D., & Pollard, N. (eds.). (in press). *Occupational Therapies Without Borders: integrating justice with practice, 2e*. Edinburgh: Elsevier Science.

Savage, M., Devine, F., Cunningham, N., Taylor, M., Li, Y., Hjellbrekke, J….., & Miles, A. (2013). A new model of social class? Findings from the BBC's Great British class survey experiment. *Sociology, 47*(2), 219–250.

Sevlon, S. (1956). *The lonely Londoners*. London: Heineman.

Smart, P. (2005). A beginner writer is not a beginner thinker. In F. Kronenberg, S. Simo-Algado, N. Pollard (Eds.) *Occupational therapy without borders*. (pp. 46-53). Oxford: Elsevier.

Stadnyk, R., Townsend, E., & Wilcock, A. (2010). Occupational justice. In C. H. Christiansen & E.A. Townsend (Eds.), *Introduction to occupation: The art and science of living* (2nd ed., pp. 329-358). Upper Saddle River, NJ: Pearson Education

Stanley, J. (1997). To celeb-rate and Not Be-Moan. In: P. Mahony, C. Zmroczek (Eds.) *Class matters,'working class' women's perspectives on social class*. (pp. 175-189). London: Taylor and Francis.

Stouffer, S. (in press). Working as an Underground Occupational Therapist/Occupational Scientist. In D. Sakellariou,

N. Pollard (eds.) *Occupational Therapies Without Borders: integrating justice with practice, 2e*. Edinburgh: Elsevier Science.

Taylor-Gooby, P. (2013). *Future Identities: Changing identities in the UK - the next 10 years*. London: HM Government office for science.

Thiongo, N. (2009). *Something torn and new: An African renaissance*. New York: Basic Books.

Townsend, E. (1998). Occupational therapy language: Matters of respect, accountability and leadership. *Canadian Journal of Occupational Therapy*, 65(1), 45-50.

Whiteford, G., & Townsend, E. (2011). Participatory occupational justice framework (POJF) 2010: Enabling occupational participation and inclusion. In F. Kronenberg, N. Pollard, D. Sakellariou (Eds.) *Occupational therapies without borders: Towards an ecology of occupation-based practices* (pp. 65–84). Edinburgh: Elsevier.

Williams, R. (1983). *Keywords*. London: Fontana.

Witte, R. (2014 [1996]). *Racist violence and the state: A comparative analysis of Britain, France and the Netherlands*. London: Routledge.

Yerxa, E. (2000). Occupational science: a renaissance of service to humankind through knowledge *Occupational Therapy International, 7* (2), 87–98.

Zephaniah, B. (1985). *The Dread Affair: Collected Poems*. London: Arena