Improving Pediatric Occupational Therapy in China

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Improving Pediatric Occupational Therapy in China

Description
“Improving Pediatric Occupational Therapy in China” is the fifth IPP sending multidisciplinary teams from Pacific University to China. In the past, IPP groups have worked on implementing changes in the orphanages at a microsystem level of Bronfenbrenner's ecological systems theory. The microsystem level gave this IPP project a good head start, however, many suggestions have been difficult to implement, as there is a lack of skilled knowledge in regards to disability and pediatrics in the orphanages. This year, we spent time re-conceptualizing and reevaluating how to create a more sustainable and impactful change. The new goal is to view this project from more of an exosystem level; a level that takes into consideration a more global view point. At this level, we will be focusing our efforts more globally by making a change at the educational level (those who provide support to the children in the orphanages) rather than attempting to implement changes directly in the orphanage. Our vision is to create a pediatric certification program for occupational therapists in China who have a bachelor’s degree in rehabilitation. This will allow an opportunity for therapists in China to further their education within the pediatric population.

Recently, Pacific has created a partnership with Sichuan University. Together, the goal is to develop a certificate program for currently practicing occupational therapists in China to specialize in pediatrics in order to serve those with disabilities. The first step in providing this certification program is to write a grant to support the funds and necessary resources required. Short-term goals to support our grant writing process included collaborating with team members and faculty advisor, Sandra Rogers, PhD, OTR/L, on completing the Logic Model to guide the researchers in understanding the direction needed for the grant writing process, completing a white paper in order to prepare future China team members to begin the grant writing process and the creation and implementation of the certification program.

The proposed certification program would include online training with a focus in specialized pediatrics courses, as well as at least one two-week internships at an orphanage for children with disabilities. The certification program would include online courses such as: Early Intervention in Pediatric Practice, Issues in Autism Evaluation and Treatment, Assistive Technology, Motor Control and Motor Learning Principles and Intervention, Treatment & Evaluation of Pediatric Feeding Issues, Pediatric Evaluation, Advanced Pediatric Issues and Trends, Seating & Positioning in Pediatric Practice, and Sensory Integration Treatment and Evaluation (refer to the White Paper for a detailed description of the curriculum). Additionally, the certification may include in-class lectures 5 from professors from Sichuan University, Pacific University, and possibly Hong Kong Polytech.

These short-term goals will lead to therapists recognizing the need for occupational therapy or rehabilitation therapy in orphanages. Implementing this orphanage internship experience would create a model for all orphanages in China to hire at least one full-time therapist per orphanage. The ultimate long-term goal is to improve disability awareness in children with disabilities in China and improving the services that they receive. This project serves as an opportunity for students to provide education on acquired skills and knowledge and a chance to learn and become more culturally diverse and globally competent as future occupational therapy practitioners.

Disciplines
Occupational Therapy

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Authors
Becky Brandt, Janelle Jones, Erin Kelly, Natalie Schaad, Chelsey Swanson, and Eva Zajac

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Improving Pediatric Occupational Therapy in China

Becky Brandt, OTDS; Janelle Jones, MOTS; Erin Kelly, MOTS; Natalie Schaad, OTDS; Chelsey Swanson, OTDS; Eva Zajac, OTDS

Project Advisor: Sandra Rogers, PhD, OTR/L

Pacific University School of Occupational Therapy
Innovative Practice Project 2014
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Biographies

Becky Brandt is originally from Kansas City, Kansas, where she grew up eating barbeque and watching basketball. In her teens, she and her family moved to Austin, Texas, where her childhood dream of becoming a punk rocker finally came true, at least until they all decided to move back home to Kansas. In college, at the University of Kansas, Becky gained an appreciation of the finer things in life like English literature, French culture, fine dining, and wine. She went on to work in the restaurant and wine industry in her 20s, but she always knew that life wouldn’t feel complete until she began a career serving others. A few years ago, she began working with children with autism, helping them with relationship development and social interaction. She is currently earning a doctorate in occupational therapy at Pacific University and especially enjoys working with children and older adults. In her spare time, she likes to garden, cook, listen and dance to music, eat, travel, and spend quality time with her husband and their cats.

Erin Kelly is originally from Seattle, Washington. She loves the outdoors in general, and feels most satisfied with life during a glorious ride on her mountain bike or up in mountains night skiing. She also enjoys cooking and scuba diving with her fiancé. Erin has clinical experience in an outpatient pediatric hospital-based clinic where she worked with children who have wide range of disabilities, including sensory processing difficulties, traumatic brain injuries, and pervasive developmental disorders. Erin also has clinical experience in a skilled nursing facility and community based mental health clinic. Her goal for the future is to specialize in pediatrics. For the time being she is excited to find a job she is passionate about and work with a team of people with similar interests and values. She is looking forward to graduating in May, traveling to China in June, and getting married in October.

Janelle Jones is originally from Salem, Oregon. She completed her undergraduate studies at Pacific University receiving a Bachelor’s in Exercise Science. She will graduate in May 2014 with a Master’s in Occupational Therapy at Pacific University. She loves spending quality time with family and friends while enjoying outdoor activities such as running, hiking and snowboarding. Janelle has clinical experience working at the Oregon State Hospital, serving those with mental illnesses, the Salem Hospital in acute care, and Providence St. Vincents working with children with disabilities. Janelle is excited to be involved in this project because of her passion for serving underserved populations and children with disabilities, as she also has a sister with autism. Upon graduation, Janelle will begin working as an occupational therapist at the Oregon State Hospital in July of 2014.
Natalie Schaad is originally from a small farming town in Northern California. Her family is now 6th generation farmers of the same land, and although she left that small town to pursue her dreams her roots are always in her heart. Natalie earned a double bachelor’s degree in English and liberal studies at Chico State before earning her teaching credential. She loved her time teaching first and second grades at a public Waldorf Charter School for a few years before deciding to pursue her doctorate in occupational therapy at Pacific University. Natalie has a strong desire to serve others, especially children in underserved and marginalized communities, and she hopes to practice occupational therapy internationally upon graduating from Pacific in 2015.

Chelsey Swanson will graduate in August 2015 with her Occupational Therapy Doctorate from Pacific University in Hillsboro, OR. Chelsey obtained her undergraduate degree in Kinesiology: Pre-Healthcare Professions from Western Washington University where she completed two internships in occupational therapy focusing on pediatric neurodevelopment and adult acute care. These internships solidified her decision to pursue a graduate degree in occupational therapy. Her passion for helping others and her love for children are driving factors in her pursuit of a career in occupational therapy. Through several international travel experiences Chelsey developed an interest in providing services to globally underserved individuals. Participating in this project increased her knowledge in pediatric occupational therapy and how to enact change on a global scale.

Eva Zajac will graduate in August 2015 with a doctorate degree in occupational therapy from Pacific University in Hillsboro, Oregon. She has a background in psychology, and a specific interest in child development and health promotion. She chose to pursue a career in occupational therapy after learning about the unique roles occupational therapy plays in enhancing the lives of children. Eva has a passion for working internationally and serving underserved populations. She is excited to be involved in this project and to support the health care needs of children living in orphanages.
Project Summary

Project History

Over 6 million people in China live with disabilities, many without adequate access to social services such as healthcare and education. Many children in China continue to be stigmatized and marginalized because the disability culture does not understand or recognize the contribution that individuals with disabilities can provide. In the United States, individuals with disabilities are valued and are capable of participating in leisure, school, work, and social participation. The goals of this project are to advocate for children with disabilities in China, provide occupational therapy services to children in the orphanages, as well as provide education and training to the orphanage staff and caregivers of the children.

The Innovative Practice Project (IPP) is in its fifth year at Pacific University and every year students and faculty travel to this orphanage to help grow and develop not only the skills of each child, but the future opportunities for children with disabilities in China. This project also creates an opportunity to influence the global view of disability as well as continued advocacy for the occupational therapy profession between our China counterparts and the staff and students at Pacific University.

So far this project has been able to make connections with Fuling Kids International, while also providing training and services to two other rehabilitative hospitals in Chongqing, China. Previous teams have implemented appropriate feeding techniques for children with cleft palates, established a dedicated classroom area, increased social interactions by providing toys and dress up materials for the children, implemented functional communication tools to help the staff and children communicate their needs to each other and finally continued staff training on rehabilitative techniques for working with a variety of disabilities.
2014 Project Focus

“Improving Pediatric Occupational Therapy in China” is the fifth IPP sending multidisciplinary teams from Pacific University to China. In November of 2013, Becky Brandt, Natalie Schaad, Chelsey Swanson, and Eva Zajac traveled to China with faculty advisor, Sandra Rogers in order to continue supporting children with disabilities and their caregivers and gather a needs assessment. Following the first trip of the 2013-2014 school year, the full team re-conceptualized the vision of the project, as described in more detail below. In June of 2014, Janelle Jones and Erin Kelly will go to China to build on previous efforts.

In the past, IPP groups have worked on implementing changes in the orphanages at a microsystem level of Bronfenbrenner’s ecological systems theory. The microsystem level gave this IPP project a good head start, however, many suggestions have been difficult to implement, as there is a lack of skilled knowledge in regards to disability and pediatrics in the orphanages. This year, we spent time re-conceptualizing and reevaluating how to create a more sustainable and impactful change. The new goal is to view this project from more of an exosystem level; a level that takes into consideration a more global view point. At this level, we will be focusing our efforts more globally by making a change at the educational level (those who provide support to the children in the orphanages) rather than attempting to implement changes directly in the orphanage. Our vision is to create a pediatric certification program for occupational therapists in China who have a bachelor’s degree in rehabilitation. This will allow an opportunity for therapists in China to further their education within the pediatric population.

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Partner Profiles

**Fuling Kids International:** FKI is a U.S registered not-for-profit 501 (c) 3 association dedicated to helping orphans who live at SWI Fuling. Kathlene Postma and Julianne Briggs, who both adopted children from the orphanage, founded FKI in 2001 to help the children who were growing up at the orphanage (Postma, n.d). The organization’s Board of Directors is composed of parents who adopted children from the orphanage, as well as developmental specialists such as occupational, physical, and speech therapists (Fuling Kids International, n.d.). FKI financial resources go toward training and financially supporting the children’s caregivers, supporting foster parents and teachers at the orphanage, funding necessary equipment such as appropriate baby cribs, as well as providing children with needed medical services (Fuling Kids International, n.d.).

**Social Welfare Institute (Fuling Orphanage)** is located in Fuling, China in the countryside high above the city. It originally opened in 1998 as a 2-room facility in the middle of Fuling providing care for children and elderly without families. This facility quickly became too small and inefficient for the growing number of children, particularly children with disabilities. Anticipating the day when most of China’s orphans will be primarily children with disabilities and unlikely to be adopted, Fuling orphanage directors and Chongqing Civil Affairs Authorities came together and developed a plan for a premier facility for the kids. A 16 and ½ acre plot of land was purchased to build a new orphanage site. In 2008, construction of the new orphanage site began designed with the complex needs of the children in mind. The dream for this institute is to provide the highest level of quality care in a beautiful and welcoming setting for children and adolescents. In 2008, the first children moved into this new site to live. It is expected that this orphanage will be home to over 800 children, most with disabilities.
**Sichuan University/Hong Kong Polytechnic:** Sichuan University is the first university in mainland China that offers an entry level Master degree in Occupational Therapy (Hong Kong Polytechnic University, n.d.). The program was developed in collaboration with Hong Kong Polytechnic University in 2013, and was designed for practicing rehabilitation therapists who have completed a Bachelor degree in a Rehabilitation Therapy program. Upon graduation, the student will possess an entry-level qualification for professional practice in occupational therapy. Prior to this collaboration, rehabilitation students completed a two-week training program in conclusion to a regular track of rehabilitation studies that qualified them to work as a specific rehabilitation specialist (OT, PT, SLP). Currently the Universities continue to work in collaboration to advance the development of rehabilitation services in China.
## Team Goals

<table>
<thead>
<tr>
<th>Goal</th>
<th>Tasks Assigned to Goal</th>
<th>Progress Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete Logic Model with team members and faculty advisor by March, 17(^{th}), 2014.</td>
<td>-Meet with Brian Hess &lt;br&gt;-Research Logic Model &lt;br&gt;-Evaluate short-term, medium-term, long-term goals, input, output and priorities of IPP project &lt;br&gt;-Collaborate as team members to fill out in regards to overall goal of IPP project</td>
<td>Completed Logic Model</td>
</tr>
<tr>
<td>Complete “White Paper” with team members in collaboration with faculty advisor by April 14(^{th}), 2014</td>
<td>-Meet with Brian Hess &lt;br&gt;-Research what writing a white paper entails &lt;br&gt;-Assess and determine needs, project issues, and direction of grant process &lt;br&gt;-Collaborate with team members to complete &lt;br&gt;-Split into sections and delegate tasks</td>
<td>Completed White Paper</td>
</tr>
<tr>
<td>Complete grant for IPP project with team members and collaboration with faculty advisor by April 30(^{th}), 2014?</td>
<td>-Meet with Brian Hess &lt;br&gt;-Find grant organization that fulfills the needs of our grant &lt;br&gt;-Collaborate with team members to complete grant &lt;br&gt;-Split into sections and delegate tasks</td>
<td>Did not complete grant. Future IPP students will use logic model and white paper to complete grant writing process in order to prepare for development of online certification program.</td>
</tr>
</tbody>
</table>

**Notes/ Comments/Expectations:** IPP team and faculty advisor will meet every Monday at noon to work on necessary tasks. Team will meet outside of this time when needed. Team should work independently from faculty advisor on more task-oriented projects. Advisor will review and suggest modifications if appropriate.

**Timeline**

<table>
<thead>
<tr>
<th>Date for completion</th>
<th>Task to be completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 17, 2014</td>
<td>Complete logic model</td>
</tr>
<tr>
<td>April 14, 2014</td>
<td>Complete white paper</td>
</tr>
<tr>
<td>April 30, 2014</td>
<td>Complete grant</td>
</tr>
<tr>
<td>May 2, 2014</td>
<td>Prepare for and present IPP project at Research Symposium</td>
</tr>
</tbody>
</table>
Team Member Expectations Agreement

Community/Innovative Practice Project Advisor: Sandra Rogers

Students: Becky Brandt, Janelle Jones, Erin Kelly, Natalie Schaad, Chelsey Swanson, Eva Zajac

Expectations of Advisor
• Advisor preferred method of contact: Email and google docs
• Schedule regular meetings with advisor at beginning of semester for Innovative Practice
• Schedule regular meetings with team members to coordinate project work
• Provide 2 days notice to add, change, or cancel a scheduled meeting
• Contact advisor and team members if you unable to attend an appointment.
• Come prepared and on-time to meetings.
• Self-direct meetings (ie: set meeting agenda in collaboration with advisor; record minutes; provide updates of progress; ask questions; propose solutions).
• Self-direct learning: Establish goals in coordination with supervisor; manage time to complete tasks efficiently and effectively; seek out resources as needed
• Project team members are each expected to take the leadership role and the follower role equally in the advising process and project.
• Turnaround times: two days minimum is required in order to provide feedback on any written documentation submitted.

Expectations Among Student Team Members
• Respond to emails in a timely manner.
  o Understand that there will be a lot of emails coming in for the next few months.
• Be flexible in organizing meeting times.
• Communication is key! If there is a misunderstanding/conflict, please be open to communicating about subject matter.
• Provide feedback for assignments in a timely manner.
• OTD2 and MOT3 communication will be efficient and flow well. OTD2 will understand that MOT3 is out on fieldwork, but will still keep them in the loop. MOT3 will take the initiative to check google docs and email to keep appraised of the project activities.
• Decisions regarding route of project will be made by group consensus.

Advisee Signatures/Date:
Becky Brandt 9/5/2013
Janelle Jones 9/5/2013
Erin Kelly 9/5/2013
Natalie Schaad 9/5/2013
Chelsey Swanson 9/5/2013
Eva Zajac 9/5/2013
Conditions for People with Disabilities in China
By Becky Brandt
Pacific University
The World Health Organization estimates that 6.5% of China’s non-institutionalized population could be regarded as having a disability, amounting to an actual number of 85 million people. However, the WHO acknowledges the possibility that many more people may have disabilities in China than have been accounted for (Zheng, Gong, Xinming, Jufen, Lijing, Wei, Lihua, Lei, Jilei, Bingzi, & Jun, 2011). China is lacking the infrastructure to improve the health and lives of people with disabilities (PWD) (Ng & Stratford, 2000), and societal attitudes toward them have been stated to remain largely negative (Liu, 2001).

This nation has recently undergone rapid social, economic, political, institutional, and demographic transitions (Zheng et al., 2011). However, updated, reliable information on how these changes have affected the circumstances of PWD is absent. This review addresses the most current information on China’s disability infrastructure and on Chinese attitudes toward disability. It will then focus on means for improving Chinese attitudes toward PWD.

**Infrastructure for PWD in China**

The five leading causes of disability in China are visual disability, hearing and speech disability, physical disability, intellectual disability, and mental disability (Zheng et al., 2011). Zheng et al. (2011) hypothesize that public health schemes have led to a decrease in genetic and infectious diseases such as polio but that rapid industrialization has led to more workplace injuries, accounting for an increase in the prevalence of physical disabilities.

Because of differences in physical appearance or mental capacity, PWD worldwide have problems receiving equal access to education, employment, health
CONDITIONS FOR PEOPLE WITH DISABILITIES IN CHINA

care, and social activities in communities (Yuker, 1988). This appears to be the case in China as well. While 20% of the population of China is illiterate or semi-literate, it has been estimated that 66% of PWD in China cannot read or write due to a lack of special education. While education services for PWD has increased since the 1980’s, the opportunity for them to attend school still remains extremely low, especially for those living in rural areas.

Only 50%-60% of PWD that are able to work are employed. Two thirds of PWD are dependent on family members for survival and subsistence (Ng & Stratford, 2000). Ng & Stratford (2000) suggest that one of the greatest problems for PWD in China is that there are not enough qualified people with the right level of expertise and skills to serve this population. The most pressing need is for dramatically increasing the number of trained professionals in primary care and education, which would require the development of new courses and an expansion of existing graduate training programs.

A more recent source references the Chinese government and states that China is vastly improving its infrastructure to accommodate PWD. The article cites figures such as 83.9% of PWD in China are employed (Ghuozhong, 2006). While the legislation and figures put out by the Chinese government may be wildly inflated, they do suggest that the government feels pressure to address the current situation. Other changes point to an improvement in infrastructure toward PWD in China. The State Council, the chief administrative authority in China, has designated a National Day of Helping People with Disabilities (State Council, 2005).
In the last 25 years, China has also participated in many international activities focusing on PWD (The United Nations Economic and Social Committee for Asian and Pacific, 1997, 1999, 2003). The Chinese government created the Chinese Disabled Persons Federation in 1988. This organization states that its aim is to represent the interests and promote the human rights and integration of people with disabilities (China Disabled Persons Federation, n.d.).

**Attitudes Toward PWD in China**

Public attitudes can be an even greater source of difficulty for PWD than limitations in physical or mental capacity (Vash, 2001). In order to improve the lives of PWD in China, improvement of attitudes toward them must be addressed. Hong Kong groups were found to have appreciably less favorable attitudes toward PWD compared to those found in Western studies (Chan, McPherson, & Whitehill, 2006). Asian-American university students have been found to have more stigmatizing attitudes toward people with physical and mental disabilities than their African-American, Latin-American, and European-American counterparts, particularly if they were born in an Asian country (Kim, Saetermoe & Scattone, 2001). Civil rights and rehabilitation for people with disabilities was found to be a new concept to healthcare students and professionals in Hong Kong, and their mean Attitude Toward Disabled Persons scale score was found to be comparatively lower than that of their foreign counterparts (King & Man, 2006). Ng & Stratford (2000) report that the general public in China is becoming better acquainted with people with disabilities resulting in improving attitudes. Another study comparing Chinese and American attitudes toward people with developmental disabilities found that
Chinese students generally had positive attitudes toward these people (Nan & Fei, 2007).

Liu (2001) states that in Chinese-dominant societies, children are believed to represent and continue the lives of their ancestors. They have the responsibility of carrying the family name, inheriting family property, and taking care of their parents. Children born with disabilities are seen as not being able to fulfill these obligations and are a dishonor to the family. People in Chinese culture may believe that disability is a punishment for the disabled person’s sins in past lives or the sins of their parents. Misunderstanding and lack of information causes an enormous amount of fear, hostility, alienation, and blame toward those with disabilities (Liu, 2001). Eight out of ten Taiwanese mothers who had children with mental retardation cited karma as the source of their child’s disability (Fried, Tsu-hsuan, & Ying-Ting, 2009). Chinese people have also been found to have superstitions and misunderstandings of people with cleft lip and palate (CLP), tending to view people with CLP as emotionally disturbed and feeling that people with CLP should “try harder” to improve their speech (Bebout & Arthur, 1997). Chan et al. (2006) found that parents of children with CLP believe that people with the disability do not need to seek help from therapists for speech disorders, due to the belief that anyone can excel if they just try hard.

**Changing Attitudes Toward PWD in China.**

Chinese studies indicate that having relationships with PWD has a positive effect on a person’s attitude toward disabilities. In a study on Taiwanese mothers’ changes in attitude after having raised children with disabilities, all mothers
CONDITIONS FOR PEOPLE WITH DISABILITIES IN CHINA

reported that their attitudes had changed dramatically in a positive way. Before the birth of their child, they felt sympathy or negative perceptions of people with disabilities. At the time of the study, they all expressed feelings of support and assistance (Fried et al., 2009). In another study on Chinese attitudes toward people with cleft lip and palate (CLP), parents and teachers of children with CLP had more favorable attitudes toward people with CLP than employers who had never had any contact with such people (Chan et al., 2006). In Hong Kong, age, education level, knowledge, and contact were found to be significant factors in the attitudes held by healthcare students and professionals toward people with disabilities (King & Man, 2006).

Western literature also suggests that increased contact, education, and role-playing all positively affect attitudes toward PWD. Yuker, Block, & Young (1966) reviewed 25 studies and found that increased contact with PWD led to more positive attitudes. American medical students were found to have a significant change in attitude toward PWD after participating in a brief information session with an opportunity to interact with people with developmental disabilities. After being “tutored” by people with intellectual and developmental disabilities, the students reported that they had greater understanding of the communication issues faced by this group as well as greater appreciation of them as individuals (Iacono & Tracy, 2008). Lys & Pernice (1996) found that the 3 strategies designated useful by many researchers for changing attitudes toward PWD- personal contact, accurate information, and simulation or role-playing, were successful in improving the attitudes of university rehabilitation students after an 8-month intervention.
CONDITIONS FOR PEOPLE WITH DISABILITIES IN CHINA

Summary

More up-to-date, reliable information regarding the current situation of PWD in China is needed in the literature. The most current information suggests that stigma against disability is widespread and that support for PWD is limited. Improvements in Chinese infrastructure and cultural attitudes are needed to improve the lives of PWD. Increased opportunities for contact and education are suggested to improve understanding. More research needs to be done in how to more positively frame disability through a lens that fits in with Chinese cultural beliefs. While it is clear that education about and interaction with people with disabilities helps to change attitudes in general, more research needs to be done on the nature of the education and interaction that will be most effective in China specifically.

References


CONDITIONS FOR PEOPLE WITH DISABILITIES IN CHINA


CONDITIONS FOR PEOPLE WITH DISABILITIES IN CHINA


Occupational Therapy in China: A Literature Review
Natalie White OTDS
Pacific University
The purpose of this paper is to provide a review of the literature surrounding occupational therapy practice in China. Occupational therapy is continually growing into a more global practice, and there are currently 73 member organizations around the world recognized by the World Federation for Occupational Therapy (WFOT, 2011). In a profession that is increasing its presence with populations worldwide, undoubtedly the dilemma arises of how clients, families, or staff can be “involved in a service of which they have little or no previous concept” (Awwad, p. 256, 2003). This is especially true in countries with cultural contexts other than the Western cultural norms on which occupational therapy has been constructed (Iwama, 2005). Occupational therapy is highly interested in a client’s culture because it influences his or her perceptions of health, illness, and occupations (Hopton & Stonely, 2006). This literature review investigates the relationship between Chinese culture and occupational therapy where three themes developed: Challenges facing occupational therapy in China, places where Traditional Chinese Medicine (TCM) and occupational therapy overlap and differ, and recommendations for the growth of occupational therapy practice in China. There are elements missing in the current literature, such as how to incorporate Chinese philosophy into occupational therapy interventions. Confucianism is the major philosophy governing Chinese culture, although Taoism and Buddhism also influence Chinese culture (Hopton & Stonely, 2006). These philosophies are an integral part of the individual’s identity, relationships, family structure, and place in society (Hopton & Stonely, 2006) so it seems critical to incorporate these philosophical values into occupational therapy practice in China, however identifying ways to do so is currently lacking in the literature.
Challenges Facing Occupational Therapy in China

The Asia Pacific region encompasses more than 20 countries or territories (Chan & Zhuo, 2011). According to Haub (2013) there are 31 provinces, autonomous regions, and municipalities in Mainland China, and the total population in China including the Special Administration Regions (SAR), such as Hong Kong SAR, Macao SAR, and Taiwan is over 1.3 billion people. In addition to being the most heavily populated country in the world, Zhao et al. (2008) suggest that China has the world’s largest number of disabled people, and that number is projected to grow. Stratford and Ng (2000) claim that the number of people with a disability exceeds 50 million, with one new child born with a serious disability every 40 seconds in China. This offers a growing incidence rate of people born with a disability at 2 thousand per day and 7-8 hundred thousand per year (2000). Zhao et al. (2008) site China’s number of disabled people at 60 million, which is the largest number of people living with a disability in one country in the world. A more recent article by Tatlow (2013) cites that people living with a disability in China at more than 85 million. Also important, Tatlow (2013) sites that disabled people are much poorer than their able-bodied peers, with their income at half of the national average.

Furthermore, according to Zhao et al. (2008) China has 102 million elderly people, which represents over one-fifth of the entire world’s elderly population. These numbers are expected to continue to rise as people in China continue to improve their health and longevity and their access to health care increases. It is projected that China’s elderly population will grow at a rate of 8% to 24%, totaling 322 million people by 2050 (2008). This will undoubtedly have a profound effect on China’s healthcare system, especially
their rehabilitation services.

It is important to compare these staggering numbers to the amount of rehabilitation therapists currently licensed to practice in China. Zhuo (2006) suggests that in 2002 there were only 5,640 rehabilitation therapists practicing in Mainland China. Of those 5,640 rehabilitation therapists, only 100 specialized in the field of occupational therapy (Zhuo, 2006). Tatlow (2013) cites that there are no licensed occupational therapists practicing in China. The discrepancy in numbers suggests that there should be better accounting for rehabilitation therapists that are licensed to practice occupational therapy throughout China. Regardless, the astounding imbalance between the population of people living with a disability and the elderly, and the significantly few numbers of rehabilitation therapists represents significant challenges facing the growth of occupational therapy throughout China.

**How Traditional Chinese Medicine and Occupational Therapy Overlap and Differ**

There are important ways that Traditional Chinese Medicine (TCM) and occupational therapy overlap and differ, which has significant implications for how successfully occupational therapy can be incorporated into Chinese culture. TCM has been practiced throughout China for over 5000 years. In Chinese culture it is believed that health is the state of spiritual and physical harmony with nature, and illness is caused by disturbance of that relationship (Jang, 1995). Similarly, Rogers and Holm (2009) suggest that in occupational therapy balance in one’s physical, social, and temporal environment promotes his or her occupational performance.

Additionally, TCM and occupational therapy overlap in concepts relating to balance and health promotion (Hopton & Stonely, 2006). In TCM, health and illness are
related to the balance of Yin and Yang, which is a concept of duality that is used to express how things function in relation to each other, with one force having the potential to transform into the opposite force (2006). Jang (1995) supports this concept by suggesting that people are advised to live according to the principles of Yin and Yang, or “orderly and harmonious in the areas of eating, living, and sex so as to maintain proper vitality and assure a long life” (p. 105). Similarly to these principles of TMC, occupational therapy suggests that human adaptation is derived from a balance of work, play, and self-maintenance within the environment (Jang, 1995). The imbalance of such activities may lead to dysfunction.

Another important overlap between TCM and occupational therapy is related to using activity as a treatment modality. Levin (1938) suggests that there is documented evidence that the Chinese were the first to use physical activity as a promotion of health, stating that in “2600 B.C. they [Chinese] taught that diseases were caused by organic inactivity” (p. 311). Jang (1995) supports this idea by citing evidence that since ancient times the Chinese have believed “‘Kung Fu’ – a series of medical gymnastics – would not only build and maintain health and vigour, but promote moral and social values” (p. 105). The importance that occupational therapy places in activity is also well documented. Jang (1995) suggests that activity can help move a client from dysfunctional state to a functional state. Similarly, according to Crepeau, Schell, and Cohn (2009) contemporary occupational therapy emphasizes engagement in occupations. This emphasis on occupational engagement suggests that people’s occupations are central to their identity and that people can reconstruct themselves through their occupations (2009).
The idea that people can reconstruct themselves through their participation in occupations is where the literature suggests that occupational therapy and TCM differ greatly. Occupational therapy is grounded in the idea that despite illness or disability “occupational engagement is important because it has the capacity to contribute to health and well being” (Crepeau, Schell, & Cohn, p. 218). In contrast, in Chinese culture there is great stigma and prejudice against people with disabilities (Chang & Hsu, 2007; Hu, Wang, & Fei, 2012; Tatlow, 2013). For example, in Chinese society, children are believed to represent and continue the lives of their ancestors (Liu, 2001). They have the responsibility of carrying the family name, inheriting family property, and taking care of their parents. Children born with disabilities are seen as not being able to fulfill these obligations and are a dishonor to the family. Moreover, many Chinese believe that disability is a punishment for the disabled person’s sins in past lives or the sins of their parents (Liu, 2001). Although, Tatlow (2013) suggests that children with disabilities can attend school with other children, some schools fail or refuse to provide students with what they need to succeed.

The literature also suggests that another major difference between Chinese culture and occupational therapy is the perception of the role of the sick person. In Chinese society, the role of the patient is dependent and passive but occupational therapy believes in the power of patients actively participating in their own therapy (Jang, 1995). According to Crepeau, Schell, and Cohn (2009) at the core of occupational therapy is the “commitment to focus on the client as an active agent” (p. 218). This is fundamentally different from TCM, which tends to treat ill people as dependent, often discouraging any form of self-help (Jang, 1995). The literature suggests that part of the reason for the sick
OCCUPATIONAL THERAPY IN CHINA

person’s dependent role in Chinese culture is related to the philosophy and belief in
destiny, and thus people attribute all misfortune to the universal law of Heaven, which is
beyond a person’s control (Jang, 1995).

Advancing Occupational Therapy in China

The literature suggests several steps that are necessary for the growth of
occupational therapy. Tatlow (2013) suggests that China is moving slowly in the right
direction. According to Zhuo (2006) the development of occupational therapy
throughout China should be step-by-step and should begin with having students in
rehabilitation therapy, currently a generic specialty, trained specifically in occupational
therapy so that they can be in line with international standards. Furthermore, Zhuo (2006)
suggests that the course content should incorporate Western occupational therapy theory,
academic content, and technology with traditional Chinese culture and lifestyle.
Chetwyn and Zhuo (2011) further that idea, proposing that models and services that are
culturally relevant will be necessary in order to advance occupational therapy throughout
China. Iwama (2009) suggests that the Kawa model “serves as a prototype for a new way
of regarding and employing theoretical material” in ways that “recognize cultural
relativity, and variation in world views and interpretations of life” (p. 226), which is
necessary when incorporating a traditionally Western practice into an Eastern culture.

Summary

In reviewing the literature surrounding the practice of occupational therapy in
China, global themes within the articles were discovered. First, the challenges facing
occupational therapy are related to China’s incredibly large population, as well as the
rapidly growing numbers of elderly and people living with a disability who are largely
underserved. The incredibly low number of practicing occupational therapists compounds the challenges of such a large population. Second, the literature suggests that there are several areas that Traditional Chinese Medicine and occupational therapy overlap and differ. TCM and occupational therapy overlap in their relationship and value of the environment, importance of balance in life, and the significant role activity and occupation play in health and wellness. However, according to the literature there are also notable ways in which TCM and occupational therapy differ. TCM and traditional Chinese culture view disability as a stigma that prevents individuals from honoring their family and fulfilling their obligations, whereas occupational therapy is founded in the belief that despite disability occupational engagement can contribute to individuals’ overall health and wellbeing. Furthermore, TCM sees the patient or sick person as dependent, while occupational therapy views the client as an active participant in her or his own therapy. Finally, the literature suggests specific ways that occupational therapy can advance in China. According to the literature, the necessary steps that need to occur in order for occupational therapy to grow in China include educating students specifically in occupational therapy with expectations that meet international standards, incorporating Western theory, academic content, and technology with traditional Chinese cultural values and lifestyles, as well employing models and services that are culturally relevant, such as the Kawa model.

Although the literature touches on very relevant areas involved in current occupational therapy practice in China, as well as steps necessary in order for the profession to grow, there is a major area missing from the literature. The idea of specifically how practitioners should incorporate the spiritual and philosophical
OCCUPATIONAL THERAPY IN CHINA

components present within Chinese culture into occupational therapy practice and intervention seems to be missing. While the literature identifies the philosophies that govern Chinese society, it fails to mention exactly how occupational therapy can incorporate those philosophies into practice when working with clients. Furthermore, while the literature addresses the stigma and prejudice attached to disability, it lacks any indication on how to overcome those barriers. These two areas present possibilities for future inquiry that can help promote the growth of occupational therapy in China.
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References


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Logic Model

**SITUATION**
Lack of advanced education for existing OT’s
Lack of appropriate OT services for children with disabilities
Lack of disability awareness

**PRIORITIES**
Grant funding for the implementation of a program that will teach existing OT’s advanced pediatric practice through a certificate program managed by Pacific U. Faculty.
Collaboration with interprofessional partners in the USA and China.

**INPUTS**

**OUTPUTS**
Activities
Participation

**OUTCOMES-IMPACT**
Short Term
Medium Term
Long Term

**ASSUMPTIONS**
That a certificate program in pediatrics will influence the state of pediatric care in China

**EXTERNAL FACTORS**
Stigma against individuals with disabilities in China

**WHAT WE INVEST**
Time and research for curriculum development from Pacific University Faculty and students.
Partners: Puling Kids International Board, Sichuan University.
Costs for Pacific U. student and faculty involvement in China.

**WHAT WE DO**
Intensive caregiver training at orphanages in China.
Collaborate with hospitals in Sichuan province.
Develop an online curriculum for advanced certification in pediatrics.
Helping therapists recognize the need for therapy in orphanages by requiring them to do “two-week” hands-on training.

**WHO WE REACH**
Who: Pediatric occupational therapists in Chongqing with a rehab therapy degree.
How: Through collaboration with Sichuan University.
Collaboration with Dr. Zhao on orphanage caregiver training.

**SHORT TERM RESULTS**
Knowledge of pediatric occupational therapy
Disability awareness
Advanced skills in pediatric practice
Opportunity for advanced/specialized education.

**MEDIUM TERM RESULTS**
The therapists make changes in their own practice.
Improved clinical reasoning skills to guide practices.
Taking social action to form parent support groups, or provide education around the opportunities for individuals with disabilities, or act as a resource.

**ULTIMATE IMPACT**
Improving therapists’ awareness of the capabilities of individuals with disabilities.
Improving therapists’ capacities to provide services to children who have a disability in China.

EVALUATION: Focus, Collect Data, Analyze & Interpret, Report
Need Statement
Mainland China has over 1 billion people and is one of the most densely populated countries in the world. Tatlow (2013) sites China’s number of disabled people at 85 million, which is the largest number of people living with a disability in one country in the world. Stratford and Ng (2000) suggest that one child is born with a serious disability every 40 seconds, which offers a growing incidence rate of people born with a disability at 2 thousand per day and 7-8 hundred thousand per year. Given the huge number of children living with a disability in China there is a definite need for trained therapists, however according to Tatlow (2013) there are no licensed occupational therapists practicing in China. Occupational therapy offers a unique therapeutic approach that improves the well-being of children with disabilities through the use of meaningful occupation and participation in society. Occupational therapy is particularly effective in addressing the needs of children with disabilities like autism in school or in other settings (American Journal of Occupational Therapy, 2008).

Dr. Sandra Rogers, Ph. D., OTR/L from Pacific University in Hillsboro, Oregon and her students have witnessed first hand pediatric rehabilitation therapy in Chinese hospitals and clinics for the past five years. Chinese pediatric occupational therapists receive very limited education prior to practicing their profession and continuing education information is sparse and may be provided by their employer. These circumstances have led to out of date and ineffective practices in pediatric rehabilitation. Chinese therapists require updated education so that their patients can benefit from the research and knowledge that has been established in the United States. Pediatric occupational therapists at the hospitals and clinics in China have expressed a desire for updated information to bring to their patients. When Dr. Rogers and her students visit the hospitals and University in China, the rehabilitation professionals are eager to learn, expressing a desire for the knowledge that is not readily available to them. Many individuals have specifically expressed interest in enrolling in continuing education courses taught by faculty from the US.

Organizational Capacity
Pacific University has a 163-year-old liberal arts tradition in the College of Arts & Sciences, as well as nationally-recognized Colleges of Health Professions, Education, and Optometry. Students in the Colleges of Health Professions and Optometry learn a unique interprofessional approach in an unrivaled blend of programs. Graduating with exemplary clinical skills and innovative approaches to evolving healthcare issues, they contribute substantially to individuals’ health and well-being and develop collaborative efforts toward innovation, support, accommodation, and advocacy for those living with
disease and disability.

Pacific University’s roots are steeped in service-learning traditions. Our founding principles endure to this day. We are an academy dedicated to shaping young people into well-educated, thoughtful leaders and active citizens of the world. Singular among its peers, Pacific imparts an uncommon sense of larger purpose to every endeavor. Students and faculty are motivated to use this knowledge to make transformative contributions to our society. We continue down this pathway of humanitarian service and cultural competency, as we have done globally, and to build existing connections and outreach to Asia.

Pacific University is dedicated to using the most updated education technology available. An interdisciplinary online certificate program in Gerontology was recently created by faculty of the School of Occupational Therapy. This certificate course was designed to empower healthcare students and professionals to create change in their work environment based on evidence-based knowledge learned in the course. The university will continue to create online continuing education programs that enrich the practice of healthcare professionals.

SANDRA ROGERS, PH.D., OTR/L is a professor in the School of Occupational Therapy. She has extensive experience in clinical supervision for both graduate and undergraduate programs. She teaches pediatrics, neuroscience, and research content. She is published in peer-reviewed journals on research related to neurological influence of the immune system, and has written numerous chapters on this subject. She has worked for four years with the Children’s hospital in Chonqing, China and orphanage in Fuling, China, teaching and training staff to care for children with disabilities.

NANCY CICIRELLO, MPH, Ed.D., PT is a professor in the School of Physical Therapy. She has a strong interest in interprofessional collaboration, specifically in working with individuals across the lifespan who live with developmental disabilities, and supporting families and educators in physical management of children and adults with disabilities. Internationally, Nancy spent two years as a pediatric PT Peace Corps Volunteer in the Fiji Islands, South Pacific. She is also an international volunteer in a number of nations with limited services for children, including Vietnam, Romania, Bolivia, Columbia, Mexico, Krygystan, and China. For the past three years she has traveled to China with other Pacific faculty to provide educational assistance to rehabilitation and orphanage staff in serving young children with developmental disabilities.

CHRISTINE A. MACFARLANE, PH.D. is a professor and director of the Special Education Program in the College of Education. Her expertise in technology and working with students who have severe disabilities has provided a rich basis for teacher
preparation, research, and service internationally. She came to Pacific in 2000, to develop and implement a collaborative teacher preparation program in special education with local school districts. She also enjoys collaborating with faculty from the School of Physical Therapy and the School of Occupational Therapy, which has led to the partnership to provide training and support to staff and families in China.

**Program Collaborators**

**Fuling Kids International:** FKI is a U.S registered not-for-profit 501 (c) 3 association dedicated to helping orphans who live at SWI Fuling. Kathlene Postma and Julianne Briggs, who both adopted children from the orphanage, founded FKI in 2001 to help the children who were growing up at the orphanage (Postma, n.d). The organization’s Board of Directors is composed of parents who adopted children from the orphanage, as well as developmental specialists such as occupational, physical, and speech therapists (Fuling Kids International, n.d.). FKI financial resources go toward training and financially supporting the children’s caregivers, supporting foster parents and teachers at the orphanage, funding necessary equipment such as appropriate baby cribs, as well as providing children with needed medical services (Fuling Kids International, n.d.).

**Sichuan University/Hong Kong Polytechnic:** Sichuan University is the first university in mainland China that offers an entry level Master degree in Occupational Therapy (Hong Kong Polytechnic University, n.d.). The program was developed in collaboration with Hong Kong Polytechnic University in 2013, and was designed for practicing rehabilitation therapists who have completed a Bachelor degree in a Rehabilitation Therapy program. Upon graduation, the student will possess an entry-level qualification for professional practice in occupational therapy. Prior to this collaboration, rehabilitation students completed a two-week training program in conclusion to a regular track of rehabilitation studies that qualified them to work as a specific rehabilitation specialist (OT, PT, SLP). Currently the Universities continue to work in collaboration to advance the development of rehabilitation services in China.

**Goals and Expected Outcomes**
The fundamental aim of this five-year project has been to advocate for children with disabilities in China, deliver occupational therapy services to children in the orphanages, and provide education and training to the orphanage staff and caregivers of the children. Together with Sichuan University our goal would be to develop a certificate program for currently practicing occupational therapists in China who hold a Bachelor’s degree in Rehabilitation Science (currently a 3 year program, with a 40 hour internship). The certificate earned will allow the occupational therapists to specialize in pediatrics and through an experiential training session will expose them to children with disabilities.
living in orphanages. The vision is to develop opportunities for therapists to practice in orphanages and to provide OT services to children with disabilities living in orphanages. Specifically, the certificate program would entail both on-line courses and a two-week intensive training session. The on-line courses would focus heavily on current theory, practice, and evidence for interventions. While the two-week session will allow development of practice of intervention skills.

Additional goals include elevating the level of experience, knowledge, and skill level for therapists in China to be comparable to those of other countries. Eliminating the disparity between therapists in China and therapists practicing in other developed nations could positively impact children living in the orphanages, and considerably brighten their future. Furthermore, this program would allow graduate health professions students at Pacific University to understand health care and international service delivery to children in need, including education on the critical role disability awareness plays in every society, meeting and working with students in another culture. Our goal is to implement this certificate program within five years (May, 2019).

**Budget Explanation**
The following budget is descriptive of the cost that will come with the development of the certificate program. The initial budget will cover the faculty expenses for the educators contributing to the certificate program. Also included are the personnel and student stipends utilized for the weeklong training intensives. Three interprofessional faculty members from Pacific University will teach a series of courses for the advanced pediatric certification. These faculty include Sandra Rogers, PH.D, OTR/L, Nancy Cicirello, MPH, Ed.D., PT, and Chris MacFarlane, PH.D. Establishing this certificate program will require more funds in the beginning. After it is developed and established the idea is that the tuition paid by the participants will cover the salary, professional development, library services, and travel expenses of the educators. The fees for course development and technology services will only be required in the initial phase.

**Sustainability Plan**
For the certificate program to be successful and self-sustainable, we will need initial funding that we will utilize for educational and recruitment purposes. Providing education and recruitment to therapists is essential for them to become aware and enlightened by the benefits of the certificate program, and will hopefully lead to future program enrollment. Other funds will be used for compensating translators, as they are a necessity when implementing a program where multiple languages merge. Funds will also be necessary for the purposes of continuing the development of valuable partnerships in China, and in support of joint conferences, both of which are important and lead to collaboration and continual education.
Tuition will be $300 dollars/credit. This amount is a compromise of the current tuition charged by the Pacific University Gerontology Certificate at $400/credit and the average cost of continuing education courses from Hong Kong Occupational Therapy Association (HKOTA) at around $267/credit. HKOTA is an appropriate model for the cost of continuing education courses because Sichuan University partners with Hong Kong Polytechnic University who is a member of HKOTA. The goal of this certificate program is to garner enough money from tuition, each session, to fund faculty members’ travel expenses.

Timeline
This is the long-term timeline for this project. The five year vision is the develop the certificate program, but within that time frame various concerns need to be met. This section will be adjusted based on the requirements of the grant applied for.
<table>
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<tr>
<th>Expenses</th>
<th>Item</th>
<th>Number Needed</th>
<th>Amount Required</th>
<th>Total</th>
</tr>
</thead>
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<td><strong>PERSONNEL EXPENSES</strong></td>
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<tr>
<td>Professional Development</td>
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<td>3</td>
<td>$1000/year</td>
<td>$3,000</td>
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<td>Salary &amp; Wages</td>
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<td>3</td>
<td>$1500/credit</td>
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<td>Course Development</td>
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<td>5</td>
<td>$500/course</td>
<td>$2,500</td>
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<td><strong>FACULTY EXPENSES</strong></td>
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<td>2-week training trip</td>
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<tr>
<td>Airfare (round trip from PDX)/Ground Travel</td>
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<td>$6,000</td>
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<tr>
<td>Lodging ($200/wk x 2 weeks)</td>
<td></td>
<td>3</td>
<td>$400</td>
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<td>Food (calc. @ $30/day x 16 days)</td>
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<td>3</td>
<td>$480</td>
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<td>Project Total for Year 1</td>
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<td>$24,290</td>
</tr>
</tbody>
</table>
Pediatric Specialty Training Certificate

The School of Occupational Therapy is proud to offer the Specialty Certificate in Pediatrics for practicing occupational, physical therapists, and speech-language pathologists.

Pediatric Specialty Certificate

This program is offered by the occupational therapy department. Students and therapists from other disciplines, especially physical therapy, speech and language pathology and nursing may find these courses relevant and are encouraged to apply. The program is for occupational therapists who are in practice that would like to advance their clinical knowledge in pediatric practice. The certificate is a series of six 3-credit graduate courses. There are five required courses (Advanced Practice Pediatric Issues and Trends) and one elective courses that are chosen by each student on an individual basis. The program is offered in a flexible format for working professionals, primarily in distance formats with one short but intensive hands-on clinical experience. There are also some hands-on clinical courses offered in a three to five-day intensive format. Students can choose the courses that meet their needs both clinically and personally.

Learning Outcomes

Pediatric Specialty Certificate Program

Students in the Pediatric Specialty Certificate Program will:

1. Demonstrate advanced proficiency in the gathering and synthesis of their knowledge base in research and evidence based practice in order to implement best practice in pediatric occupational therapy.
2. Exhibit advanced competency in clinical reasoning related to practice, advancing their ability to identify, analyze and apply evaluation and treatment techniques to gain excellence in care for the complex challenges of advanced pediatric practice.
3. Display advances in mentoring and leadership skills that empower them to manage
staff and to foster advanced clinical practice skills for junior pediatric practicing clinicians.

<table>
<thead>
<tr>
<th>Course Offerings for Pediatric Certificate</th>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>Fall</strong></td>
<td><strong>Spring</strong></td>
<td><strong>Summer</strong></td>
</tr>
<tr>
<td>Early Intervention in Pediatric Practice</td>
<td>Motor Control and Motor Learning Principles and Intervention</td>
<td>Advanced Pediatric Issues and Trends</td>
</tr>
<tr>
<td>Issues in Autism Evaluation and Treatment</td>
<td>Treatment &amp; Evaluation of Pediatric Feeding Issues</td>
<td>Seating &amp; Positioning in Pediatric Practice</td>
</tr>
<tr>
<td>Assistive Technology</td>
<td>Pediatric Evaluation</td>
<td>Sensory Integration Treatment and Evaluation</td>
</tr>
</tbody>
</table>

**Advanced Practice Pediatric Issues and Trends Course Description:** This course is designed to explore the most recent issues and trends in the area of pediatric rehabilitation occupational and physical therapy. The course will focus on evidence-based practice, mentorship and leadership, and community based practice within the current profession of the student. The students will apply the course content to their clinical and professional practice settings through course assignments. It will be offered primarily in a distance-learning format with two weekends of on campus experiences.

**Pediatric Evaluation Course Description:** This course is designed to provide students with an intermediate to advanced level understanding of the process of pediatric evaluation in occupational therapy. The course will focus on the full process of occupational therapy evaluation including referral sources, identifying appropriate evaluation tools, clinical observations, standardized assessment, report writing, evaluation accommodations, and the reporting of assessment results.
Treatment and Evaluation of Pediatric Feeding Issues  Course Description: This course provides an extensive overview of evaluation and treatment of pediatric feeding disorders. The course will focus on oral motor dysfunction, tube-feeding, sensory issues, positioning and handling, and behavioral management related to feeding/eating. Conditions that effect feeding/eating are explored along with medical and therapeutic assessments. The students will apply the course content to their clinical and professional practice settings through course assignments. It will be offered in both an intensive weeklong on-campus format.

Sensory Integration Treatment and Evaluation  Course Description: This course is designed to provide an extensive overview of sensory integration theory, neurology, evaluation and treatment related to clinical practice for occupational and physical therapists. Sensory integration theory is explored in relationship to function and occupation. The most relevant evaluations and treatment interventions are presented as well as a critical review of effectiveness research in sensory integration. The students will apply the course content to their clinical and professional practice settings through course assignments.

OT 625 Adolescent & Early Adulthood Issues in Autism  Course Description: This course investigates the lifespan challenges of individuals with Autism Spectrum Disorders transitioning through adolescence and participating in life as young adults. The student will participate in an active exploration of issues of the client with autism including: adolescent social and learning abilities, young adult vocational success, adult transition to independent living, and aging impacts. The student will learn how to evaluate and establish community-based treatment plans to support adolescent and adult aged clients with autism in attaining and sustaining the most independent living possible. The student will also gain knowledge in establishing clear resource support for their clients in the community.

Assistive Technology  Course Description: This course is designed to offer therapists and educators a detailed knowledge and skill level in the areas service provision involving the use of Assistive Technology. These can be low or high tech solutions and can impact areas of gross motor, fine motor, speech and language, self-
feeding, social/adaptive play skill domains and education/learning. On site classes include experiential lab and introduction to low and high tech devices.

**Early Intervention Course Description:** This course is designed to prepare the student to implement the occupational therapy process along with health care needs with children who are from birth to three years of age and to be knowledgeable about factors that affect service delivery. In-class exercises and out-of-class assignments will be provided to improve students’ skills and increase students’ self-confidence with the new content of the course.

**Autism & PDD: Evaluation & Intervention Strategies** Instructor: Amy Lynch, MS, OTR/L and Amy Henry MS, OTR/L  
**Course Description:** This course is an introduction to the diagnosis and treatment of Autism-spectrum disorders for pediatric therapists. An introduction of the basic information on how these disorders are diagnosed, what comprises the disorders and how to compose an interpretive report of evaluation findings, including a treatment plan with home and school-setting strategies is provided.

**Seating & Positioning in Pediatric Practice**  
**Course Description:** This course will assist treating clinicians in increasing their knowledge and skills when using seating strategies for their children. Seating needs for children include safe passive transport within the community and their environment, adequate support for eating, as well as support for independent postural control for task participation. This course will focus on all the needs for seating, including seating needed for postural management of the child, as well as seating for the child’s development of postural control. The course is offered over 8 hours a day for 5 days with assignments due after the ending of the on-campus portion of the class.
IMPROVING PEDIATRIC OCCUPATIONAL THERAPY IN CHINA

Becky Brandt, OTDS
Janelle Jones, MOTS
Erin Kelly, MOTS
Natalie Schaad, OTDS
Chelsey Swanson, OTDS
Eva Zajac, OTDS

Advisor: Sandra Rogers, PhD, OTR/L
Pacific University School of Occupational Therapy
HISTORY OF THE PROJECT
HISTORY OF THE PROJECT

2009
Small team of OT/PT established contacts with hospitals. Did not visit orphanage due to H1N1.

2010
OT/PT and FKI
One team went to the orphanage in Fuling and visited the rehab hospital in Chongqing.

2011
OT/PT/SPED, OT & PT students. One week each at the orphanage and the rehabilitation hospital. Trained caregivers and therapists.

2012
OT/PT/SPED and FKI. Two teams for two trips. Orphanage, rehab hospital, children’s hospital, two orphanages, connected with Lifeline.

2013
OT/PT/SPED and FKI
Three hospitals, two universities, one orphanage.

2014
OT/PT/SPED and FKI. Three different teams for three different trips. Orphanage, hospitals, and developed partnerships with NGOs.
HISTORY OF THE PROJECT
Social Welfare Institute: Fuling
Hospital Partnerships

Military Rehabilitation Hospital

Children's Hospital Chongqing Medical University
Sichuan University
PRESENT

Needs Assessment
**PRESENT**

Logic Model

**INPUTS**
- Grant funding for the implementation of a program that will teach existing OT's advanced pediatric practice through a certificate program managed by Pacific U. Faculty.
- Collaboration with Interprofessional partners in the USA and China.

**OUTPUTS**
- Activities
- Participation

**OUTCOMES-IMPACT**
- Short Term
- Medium Term
- Long Term

**SITUATION**
- Lack of advanced education for existing OT's
- Lack of appropriate OT services for children with disabilities
- Lack of disability awareness

**PRIORITIES**
- Time and research for curriculum development from Pacific University Faculty and students
- Partners: Fuling Kids International Board, Sichuan University
- Costs for Pacific U. student and faculty involvement in China

**WHAT WE INVEST**
- Intensive caregiver training at orphanages in China
- Collaborate with hospitals in Sichuan province.
- Develop an online curriculum for advanced certification in pediatrics
- Helping therapists recognize the need for therapy in orphanages by requiring them to do "two-week" hands-on training

**WHAT WE DO**
- WHO: Pediatric occupational therapists in Chongqing with a rehab therapy degree.
- HOW: Through collaboration with Sichuan University Collaboration with Dr. Zhao on orphanage caregiver training.

**WHO WE REACH**
- Knowledge of pediatric occupational therapy
- Disability awareness
- Advanced skills in pediatric practice
- Opportunity for advanced specialized education.

**SHORT TERM RESULTS**
- Improving therapists' awareness of the capabilities of individuals with disabilities.
- Improving therapists' capacities to provide services to children who have a disability in China.

**MEDIUM TERM RESULTS**
- The therapists make changes in their own practice.

**ULTIMATE IMPACT**
- Improved clinical reasoning skills to guide practices.
- Taking social action to form parent support groups, or provide education around the opportunities for individuals with disabilities, or act as a resource.

**EVALUATION**
- Focus, Collect Data, Analyze & Interpret, Report
Present

White Paper
**Future Certificate Program Timeline**

- **2014**: Begin Pacific University occupational therapy Innovative Practice Project 2014-2015: focus on development of certificate program
- **2015**: Begin Pacific University occupational therapy Innovative Practice Project 2015-2016: focus on curriculum of certificate program
- **2016**: Begin Pacific University occupational therapy Innovative Practice Project 2016-2017: hold focus groups and run pilot studies with current draft of the curriculum
- **2017**: Begin Pacific University occupational therapy Innovative Practice Project 2017-2018: revise curriculum and develop online product
- **2018**: Begin Pacific University occupational therapy Innovative Practice Project 2018-2019: work out admission, library services, and module format for participants
- **2019**: Implementation of Certificate Program
### Course Offerings for Pediatric Certificate

<table>
<thead>
<tr>
<th>Fall</th>
<th>Spring</th>
<th>Summer</th>
</tr>
</thead>
</table>
Outcomes

• Improving therapists’ awareness of the capabilities of individuals with disabilities

• Improving therapists’ capacities to provide services to children who have a disability in China
JUNE 2014

Beijing, China

World Federation of Occupational Therapy Conference

Japan
Thank you!!!

Sandra Rogers

Brian Hess

Fuling Kids International

Pacific School of Occupational Therapy
Travel Logistics

A critical aspect of the China IPP is the organization of travel logistics. Outlined below is a description of important tasks related to international travel. Specific contact information is provided that may be useful for future reference.

Estimated Costs & Budget

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Airfare China &amp; Japan</td>
<td>$2,362.00</td>
</tr>
<tr>
<td>Visa Processing Fee</td>
<td>$140.00</td>
</tr>
<tr>
<td>Courier Service (dependent on # of visas sent)</td>
<td>$35.00</td>
</tr>
<tr>
<td>Photos for visa</td>
<td>$10.00</td>
</tr>
<tr>
<td>Hotel China (aprx. $50.00/night @14 nights)</td>
<td>$700.00</td>
</tr>
<tr>
<td>Japan</td>
<td>$800.00</td>
</tr>
<tr>
<td>Meals 14 days</td>
<td>$140.00</td>
</tr>
<tr>
<td>Ground Transportation Group rate ($75.00 each way)</td>
<td>$150.00</td>
</tr>
<tr>
<td>World Federation of Occupational Therapy Registration Fee (student rate)</td>
<td>$90.00</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$4,427</strong></td>
</tr>
</tbody>
</table>

Immunizations Process & Contact:

- Contact Jackie Gust for immunizations
  - Registered nurse at Good News Community Health Center
  - Provides immunizations and consultative services to students
  - 18000 SE Stark St., Portland, OR 97233
  - jackiegust@yahoo.com
  - Office: (503) 489-0567; Cell: (503) 425-9252

- Immunizations
  - Consultation- $50
  - Tetanus-diphtheria booster- $45
  - Hepatitis A- $65
  - Hepatitis B- $65
  - Typhoid (good for 2 years)- $60
  - Flu vaccine- $15
  - Malaria- (cost varies depending on prescription)
  - Antibiotics prescription
Plane Ticket & Contact:
• Travel Agent:
  o Larry Maile
    FROSCH Student Travel
    1430 SW Park Ave
    Portland, OR 97201
    (650) 762-1880
    larry.maile@frosch.com
    www.froschstudenttravel.com
    www.frosch.com
• Flight details for June 2014 trip:
  o Saturday, May 31st, Delta Air Lines: Portland, OR to Chongqing, China
  o Tuesday, June 10th, Suchuan Airlines: Chongqing, China to Beijing, China
  o Sunday, June 15th, China Eastern Air: Beijing, China to Tokyo, Japan
  o Sunday, June 22nd, Delta Air Lines: Tokyo, Japan to Portland, OR
• Traveler’s insurance:
  o Recommended to insure yourself and the trip costs

Travel Document Checklist
1. International Travel Contract
2. Proof of Insurance Form
3. Copy of Vaccination and Inoculations (if required)
4. Copy of passport (front page)
5. Itinerary
6. Traveler Information Form
7. Student has initiation a conversation about health/disabilities issues
8. Student given access to Crisis Response Plan on the web or via email
9. Student has registered with the Travel Guard Assistance website
10. Is the student traveling to any countries with sanctions and warnings?