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## **Expanding beyond individualism: Engaging critical perspectives on occupation.**

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## Expanding beyond individualism: Engaging critical perspectives on occupation

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### ABSTRACT

**Background:** Perspectives that individualize occupation are poorly aligned with socially responsive and transformative occupation-focused research, education, and practice. Their predominant use in occupational therapy risks the perpetuation, rather than resolution, of occupational inequities.

**Aim:** In this paper, we problematize taken-for-granted individualistic analyses of occupation and illustrate how critical theoretical perspectives can reveal the ways in which structural factors beyond an individual's immediate control and environment shape occupational possibilities and occupational engagement.

**Method:** Using a critically reflexive approach, we draw on three distinct qualitative research studies to examine the potential of critical theorizing for expanding beyond a reliance on individualistic analyses and practices.

**Results:** Our studies highlight the importance of addressing the socio-historical and political contexts of occupation and demonstrate the contribution of critical perspectives to socially responsive occupational therapy.

**Conclusion and significance:** In expanding beyond individualistic analyses of occupation, critical perspectives advance research and practices towards addressing socio-political mediators of occupational engagement and equity.

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## Introduction

In many countries categorized as belonging to the 'Global North' or 'Western societies' [1], the individual is tacitly framed as the fundamental element of human experience. Aligned with this perception, human occupation is predominately conceptualized through an individualistic lens [2–4]. As occupational therapists and scientists from across Canada and the United States who are engaged in varied inquiries, we share concerns about the predominance of individualistic thinking and approaches in occupational therapy and occupational science. Moreover, we have each sought to move beyond individualism in our respective research by drawing on a diverse range of critical theoretical perspectives. Our co-authorship on this paper emerged through mutual interest in each other's work and critical dialogue about our various rationales and approaches to engaging with critical perspectives. Through our discussions and engagement with

epistemic reflexivity [5], we identified common threads across our critical theorizing that expanded our analyses beyond individualism.

In this paper, we problematize individualistic analyses of occupation and articulate the potential of critical perspectives for informing socially responsive occupation-focused research, education, and practice. We begin by locating individualism within the broader ideological contexts of neoliberalism and biomedicine and in relation to dominant perspectives on occupation and occupational therapy. Then, we provide three exemplars from our respective lines of research to illustrate how broader social and structural factors shape occupational engagement and equity. Our exemplars highlight how: (a) structural factors shape Indigenous families' engagement in early childhood programs; (b) dominant, oversimplified understandings of social inclusion reinforce social inequities for disabled youth, and (c) contemporary

understandings of long-term unemployment embedded in discourses, policies and services shape occupational possibilities. We conclude with a discussion of the potential for critical perspectives to shift education, policy, and practice towards a focus on addressing socio-political mediators of occupational engagement.

### **The constant pull towards individualism: Neoliberalism and biomedicine**

Individualism involves viewing various social issues and phenomena, including occupation, as primarily residing in and being shaped through individuals [6]. Individualism is also central to a neoliberal political and institutional rationality, which is focused on the economic growth and success of a society. By presupposing that economic growth will naturally lead to equality and social justice, neoliberal approaches posit there is no need to ensure a fair redistribution of wealth [7]. Neoliberalism reinforces individualism through prioritizing a focus on individual self-interest, responsibility, and reliance over group or collective mutual interests and supports. It conveys the message that what happens to an individual is their personal responsibility and ‘choice’ [8]. Since the 1980s, neoliberalism, in the context of globalization and the rising influence of international organizations such as the Organization for Economic Cooperation and Development, has increasingly permeated diverse socio-political contexts and become a pervasive, normative, and largely invisible force in the global landscape [9–12]. In recent years, neoliberalism has been critiqued for creating increased conditions of vulnerability for particular population groups within societies as well as globally resulting in increased social injustices and health inequities [9,13,14].

In alignment with individually focused neoliberal rationality, biomedicine emphasizes health, illness, and disability as individual experiences. While biomedical approaches play an important role in treating ill-health at the level of the individual, they fail to address how individuals’ and population groups’ health, quality of life, and longevity are impacted by multifaceted social and structural determinants [15]. Given the strengthening of neoliberal and biomedical perspectives in public institutions including healthcare and academia, opportunities for clinicians, researchers, and students to engage with the complexities of peoples’ lives are eroding [16]. Moreover, providing occupational therapy interventions that are informed by and responsive to individuals’ and population groups’ lived realities and priorities has become much more

challenging in the current individually focused socio-political climate.

### **A critical reframing of occupation**

While occupational therapy and occupational science clearly recognize the influence of contextual factors on occupational engagement, there is a tendency to focus on physical and social dimensions of an individual’s immediate environment rather than broader socio-economical, historical, and political contexts [17,18]. In recent years, a growing number of occupational scientists and therapists in different parts of the world have raised concerns about the tendency for occupation to be understood primarily as an individualized phenomenon; attempting to re-shape how occupation is conceptualized and challenge boundaries to transformative, critical forms of practice [2,18–23].

Individualism is underpinned by the assumption that all individuals and population groups have autonomy over their occupations; as such, it negates or obscures structurally rooted social conditions that might constrain individuals in particular ways. Adopting an individualistic perspective of complex social issues, including high rates of unemployment among people with disabilities [24] and health inequities among racialized population groups [25], thus risks framing social problems as the result of personal deficiencies or lifestyle choices. Individualism as a form of reductionism, in turn, informs ‘solutions’, or practice and policy interventions, that are primarily focused on changing individuals’ behaviors, skills, or abilities to overcome or adjust to their circumstances [26].

Decontextualized individualistic perspectives obscure how occupational choices and engagement, including those made by occupational therapists in daily practice, are shaped by broader social, economic, historical, and political structures and contexts [18,27,28]. Pervasive system-level directives most often require practices that assess, intervene, measure and analyze occupational ‘problems’ and ‘outcomes’ at the level of individuals. These normalized ‘best practice’ processes are key places where individualism is often reproduced consciously or not, under pressures of the dominant biomedical culture, including funding and documentation requirements.

When broader structural constraints are not addressed, occupation-focused practice and policy interventions not only lack social impact but tacitly uphold and become complicit in reproducing the structural arrangements that create and sustain injustices and inequities [29]. Echoing other scholars [6,27,30], we contend that expanding beyond

individualism toward critically reflexive and relational perspectives [2,18,30] will better serve occupation-focused practice, research, and education. This critical orientation requires that occupational therapists continue to attend to and address individual capabilities and priorities while simultaneously recognizing and tackling broader social and structural determinants [18,26].

As our examples illustrate, there is no one 'critical perspective'; rather, the term references a broad ensemble of critical theories and perspectives that have relevancy for particular social issues and population groups. A central assumption of critical theorizing is that socio-historical power relations mediate all knowledge, such that there is no ahistorical, neutral knowledge that exists outside of human consciousness [31]. Power is also perceived as operating across and through all social relationships and organizations [31]. Critical theorizing involves questioning and disrupting taken-for-granted values, norms, assumptions, and ideologies; that is, exposing and contesting the 'sacred texts' that shape understandings of occupation [3,32]. In taking a critical stance, occupation is viewed as a multifaceted social, economic, political, historical, and cultural phenomenon and as such an important site where conditions of privilege and disadvantage are (re)produced [33]. Critical occupational perspectives are thus concerned with exposing how occupations and occupational engagement are shaped by the complex interplay of broader socio-political structures [18,34]. As illustrated through our empirical examples, critical approaches necessarily entail commitments to expand beyond describing and addressing 'individualized' problems and solutions that are often embodied in standardized approaches to assessment and intervention within healthcare guidelines and research. Furthermore, there is an expectation to work towards transforming system-level practices and policies. In other words, critical thought informs critical action.

In the following section of this paper, we draw on exemplars from our respective lines of research to illustrate why individualism is a concern for each of us, and how critical perspectives have illuminated the ways in which occupations are shaped by structural inequities. Detailed discussion of the range of theoretical perspectives that inform our respective inquiries is beyond the scope of this paper. Here we focus on providing examples that highlight the shared philosophical assumptions and motives that underpin our works. Full descriptions and results of our work have been reported elsewhere and are cited accordingly.

In the discussion that follows the examples, we address the potential implications of critical theorizing for occupation-focused practices, policies, research and education.

### ***Example 1: Occupational 'choice' in the context of Indigenous families in Canada***

The first example comes from a critical ethnographic study, completed in 2015, by the first author Gerlach in partnership with an Indigenous early childhood development (ECD) program in British Columbia, known as the Aboriginal Infant Development Program, or AIDP [35]. Gerlach, is of European ancestry and has an extensive background working with Indigenous populations. Gerlach had a longstanding relationship with the AIDP prior to commencing this research. Her central motive in undertaking this study was to understand how AIDPs engaged with and responded to Indigenous communities and families in ways that were socially responsive and equity oriented, and to explore the implications for community-based occupational therapists working with Indigenous populations. This inquiry was grounded in relational epistemologies [36,37] and informed by the distinct but overlapping critical theoretical perspectives of postcolonial feminism [38–40] and Indigenous feminisms [41,42].

In the context of Indigenous peoples<sup>1</sup>, applying an individualistic lens is problematic as it erases the profound and multifaceted impacts of colonization on families and children's everyday lives and occupational opportunities [33]. As a result, socially rooted problems, including the downstream effects of poverty, can become manifested as deficits at the level of individual children, and 'treated' accordingly. Bringing a decontextualized and ahistorical lens to understanding why some Indigenous caregivers' are reluctant to engage in programs like AIDPs, for example, risks that caregivers' reticence is misconstrued as 'choice'. The notion of choice, as a liberal individualistic perspective, disregards the broader contexts and complexities of Indigenous families' lives. This discourse also perpetuates assigning racialized, stereotypical labels, such as 'noncompliant' or 'disinterested', to explain caregivers' apparent 'choices'.

In the study [43], employing critical theoretical perspectives in analyzing women caregivers' reluctance to engage in AIDPs illuminated how their decision-making about accessing these programs was embedded in a context of mistrust. Rather than being an autonomous decision, women's agency was influenced by intersecting social and structural factors that included: historical forms of state oppression and

intervention; ongoing experiences of over-surveillance and intervention by the contemporary child welfare system; historically entrenched systemic racism and gender discrimination; and socio-economic policies that kept families led by single-women in chronic cycles of poverty resulting in high rates of food and housing insecurity. Employing critical theoretical perspectives in this research provided a comprehensive viewpoint for understanding how Indigenous women's occupational choices for their children were shaped by multifaceted factors beyond their individual control and immediate environment. The findings highlight the importance of transforming ECD policies and practices in ways that take into account the socio-historical contexts of Indigenous families' lives and the ongoing power relations that can constrain children's access to beneficial programs.

### ***Example 2: Individualism in the context of childhood disability***

The second example is drawn from a critical qualitative study, completed in 2015, by the second author in central Ontario, Canada that examined the lives and practices of 13 youth who use augmentative and alternative communication (AAC) [44]. Teachman identifies as a white, non-disabled Canadian woman whose background as a clinician and researcher in childhood disability informed concerns about the effects of oversimplified notions of social inclusion as a taken-for-granted 'good'. Framed by Bourdieu's theory of practice [45] and Bakhtin's dialogism [46] the study moved beyond the notion of 'giving voice'. It aimed to interpret how participants' presentations of their lives and their understandings of social inclusion were shaped and delimited by negative valuations of disability and by social values, norms and beliefs that reproduce a moral ordering of bodies. As a result of these deeply embedded social valuations, persons who have communication and physical impairments are judged as 'lacking' and are exposed to stigmatizing social conditions [47].

Pervasive neoliberal and individualistic perspectives structure social systems that privilege 'normal' bodies and (re)produce binaries such as disabled/non-disabled, and dependent/independent that organize social relations. In children's rehabilitation, both 'communication impairment' and 'disability' are constructed largely as individual problems or deficits [48]. Inclusion is most often unreflectively constructed as an individual journey by disabled persons toward idealized mainstream or 'normal' social spaces [49]. This over simplified understanding perpetuates

assumptions that interventions aimed toward enabling disabled children to participate in 'normal' occupations of childhood will facilitate a child's inclusion, and shapes the types of childhood occupations that are socially expected and valued for children and youth [50].

In the study analyses [44], Bourdieu's [45] conceptualization of social space illuminated a more nuanced and relational understanding of inclusion – one that moved beyond individualistic approaches to reveal that a person's sense of inclusion is always situated and relational, dependent on power relations, and neither neutral nor universally beneficial. Using this lens revealed that negative valuations of disability were deeply inscribed and embodied by the participants. As a result, youth perceived marginalizing experiences in so-called 'inclusive settings' as reasonable and 'just the way of the world'. Youths' perceptions of what they could expect to do or be in the world were constrained by their understandings of 'their place in the world' and what was 'reasonable' to expect. The research shows that some forms of inclusion unintentionally reproduce the very sorts of exclusionary practices they were designed to redress. In addition, the results demonstrate that focusing on inclusion at the level of individuals' perceptions and experiences fails to address persistent inequities, and may unintentionally perpetuate taken-for-granted systems that reproduce the exclusion and marginalization of disabled persons.

### ***Example 3: Individualism and long-term unemployment***

The final example draws on an on-going collaborative ethnography that the third, fourth, and fifth authors have been conducting in London, Canada, and Saint Louis, United States since 2014. Authors Laliberte Rudman, Aldrich, and Huot are also of European ancestry; from diverse national contexts and linguistic backgrounds. Laliberte Rudman and Huot are Canadian with Francophone origins, with the latter specifically identifying as French-Canadian, and Aldrich is a United States citizen and fluent only in English. The study aims to enhance understandings of how multi-level approaches to addressing long-term unemployment shape possibilities and boundaries for everyday lives and occupations. In a context of increasing long-term unemployment and precarious employment [51], neoliberally informed discourses, policies and service approaches locate the problem of unemployment within individual deficiencies, irresponsibility, and inactivity. Similarly, related solutions focus



on promoting individual responsibility through mandated activity expectations centered on work readiness, job seeking, and finding the 'quickest route to work' [9,52].

For Laliberte Rudman, this project emerged out of a program of research focused on restructuring social policies and discourses related to aging and retirement, through which she had become increasingly critically aware of the precarious position of aging workers as a 'surplus labor force' within neoliberal-informed approaches to extending work lives [53]. For the fourth author, this project emerged out of her focus on the everyday experiences of discouraged workers [54], and her interest in how occupations are categorized [55] and made visible in occupational therapy and occupational science terminology [56]. For the fifth author, her ongoing research about the social and economic integration experiences of immigrants to Canada has informed her interest in better understanding structural barriers to labor market participation [57].

Informed by governmentality theory, our research seeks to show the limits of individualistic approaches by addressing how governing occurs through the shaping of particular ideal and possible activity expectations and subject positions for 'the unemployed' [58]. To understand what happens when unemployment policies are enacted, we are drawing upon Lipksy's [59] work to conceptualize employment support service providers as mediators between government policy and the recipients of policy-informed support services.

This research [60] is revealing that receiving services and complying with activity expectations perpetuates long-term unemployment and limits occupational possibilities. For example, a pervasive contradiction of being 'activated, but stuck' illustrates the impact of individualistic unemployment policies on occupational possibilities. Participants expressed being actively engaged in a range of expected job seeking, job preparation, and job acquisition activities while simultaneously 'being stuck' across a range of non-employment occupational realms [60]. Our findings also highlight how individual precarity and broader inequalities are perpetuated and exacerbated, for both service recipients and service providers, when neoliberal aims of economic efficiency are prioritized and discrimination tied to age, race, disability, and other characteristics is ignored as an explanation for difficulties with employment [60]. Assuming a critical occupational perspective in this research helped counter dominant constructions of people without work as

dependent and inactive while raising awareness of how their occupational possibilities are shaped by policies' activity expectations.

## Discussion

It is important to acknowledge that given the location of all of the authors, the work we have shared has focused on struggles in the Global North. However, neoliberal and individualistic discourses, policies, and practices are not unique to Canada and the United States and have relevancy in many global contexts. Furthermore, critical inquiries conducted at a local level are useful for understanding the reciprocal nature of the relationship between global processes and people's everyday lives [61]. As well, counter-knowledges and resistances evolve and have relevancy in diverse geographical contexts that share similar challenges with neoliberalism, colonialism, patriarchy, and other similar forces [62]. Our reflections on these projects demonstrate the importance of expanding beyond individualistic analyses in order to better understand and address the diversities of peoples' identities and occupational realities. Moreover, the examples illustrate how peoples' occupational possibilities are shaped within and bounded by social and structural contexts, life histories, personal circumstances, and policies.

As noted in the introduction, individualistic perspectives are aligned with a neoliberal rationality that prioritizes economic success and individual responsibility while simultaneously shaping and sustaining forms of marginalization and oppression. In agreement with authors such as Galheigo [63], Malfitano et al. [22], and Hammell [3], our inquiries emphasize that if we overlook complex social and structural dynamics and accept that they are 'just the way of the world', we become complicit, albeit unintentionally, in maintaining the status quo and reproducing the social injustices and occupational inequities that we aim to ameliorate. As demonstrated in previous research [28,64,65] occupational therapists' actions are shaped by the systems in which they are employed, such that considerations of funding, job security, resource constraints, and accountability mechanisms can present significant challenges to practicing in critical, radical ways and lead to experiences of ethical tensions and occupational alienation. As 'street-level bureaucrats who make policy' [59] through their interactions with clients, occupational therapists tacitly reproduce, resist, or subvert the individualistic governing mechanisms that shape both their own practices and their clients' lives. Thus, expanding beyond individualistic

analyses and practices requires not only integrating critical perspectives to re-conceptualize occupation, but also to reveal and address the contradictions and limitations faced by occupational therapists within current structural and system dynamics.

In adopting a critical theoretical stance we question how the concept of occupation is conceptualized and mediated through the scope and nature of largely taken-for-granted practices, policies, research, and education programs, both within and outside occupational therapy and occupational science [66]. Employing critical theoretical perspectives in practice, research, and education creates an intellectual space to explore different ways of problematizing and addressing occupational inequities and for disrupting the status quo of power, knowledge, and practice-as-usual within occupational therapy and occupational science. Such work can add to the emerging body of literature employing critical perspectives to question how occupation-based concepts have been conceptualized, such as occupational ‘choice’ [27] and occupational identity [67], and generate new concepts that address occupation as political and situated, such as occupational consciousness [68] or occupational possibilities [69].

We are not advocating for alternative ‘universal truths’ about occupation and recognize, as critically situated scholars, that our analyses are situated in our personal, geographical, disciplinary and other locations. Rather we call for research and practice in the context of complex social issues and occupational inequities to be informed by critical theorizing in ways that are collaborative, reflexive, and transformative. As we have illustrated, critical theoretical perspectives generate nuanced, relational, and complex analyses and knowledge on occupations, occupational engagement, and occupational therapy and the socio-political systems and structures in which they are embedded. Furthermore, they add value to research by revealing the largely invisible mechanisms through which social and occupational inequities are unwittingly reproduced. Recognizing these mechanisms is a vital first-step toward visioning practice changes. Critical approaches create a space, and a responsibility, to re-imagine occupational therapy practice. For example, what would occupational therapy practice with Indigenous families look like if it was informed by understandings of how intersecting forms of oppression including systematic racism, gender discrimination, and policies that perpetuate poverty? How can occupational therapists address issues of inclusion and voice in children’s rehabilitation in

ways that do not valorize ‘normal’ occupations? What could employment support services look like if they were responsive to the range of occupations persons need to engage in to ensure the survival and wellbeing of themselves and their families?

Drawing on these perspectives provokes critical reflexivity on our socio-historical identities and positionality. Such reflexivity is crucial to ensure that our practices do not inadvertently impose particular worldviews on others in ways that tacitly perpetuate marginalization and oppression [70]. We need to critically reflect on and examine how dominant occupational therapy models and taken-for-granted practices are being reinforced through our professional education programs. While occupational therapy education often emphasizes a holistic and client-centered approach, enacting this is often constrained by the constant pull of neoliberal and biomedical ideologies that focus on the individual. Linking fundamental elements of occupational therapy practice with knowledge of societal power relations can help students understand how everyday practices can be framed as justice-seeking endeavors [71]. Developing critical literacies and structural competency among occupational therapy students can sensitize them to the relationship of knowledge production/mobilization and societal power relations [72]. Infusing critical perspectives into occupational therapy education can ultimately foster larger changes in practice by promoting students’ reflexive considerations of how individualistic models and practices threaten our professional aspirations of social justice and transformation. For instance, shifting the focus from developing students’ cultural competency to cultural safety [73], helping students understand the importance of critical literacy and political awareness [64], and emphasizing social justice and human rights within curricula [63,75,76] can all contribute to expanding beyond individualistic perspectives in occupational therapy and occupational science practice and research.

## Conclusion

Neoliberal government policies often create a dissonance between their intended outcomes in addressing complex social issues and the effects their policies have on the everyday occupational realities of individuals and population groups who experience varying forms of structural social disadvantages. Furthermore, occupational therapists can become complicit in tacitly reproducing individualism by complying with re-configured health and social systems as well as ‘best practice’ guidelines that often focus on fixing



problems at the level of the individual. For occupational therapists to contribute towards addressing the impact of structurally rooted social determinants on peoples' occupational engagement, we need to pay explicit attention to how tacit assumptions that underpin individualism can inadvertently reinforce institutional patterns that promote social injustices and occupational inequities. Thus, expanding beyond individualism requires ongoing efforts to widen our occupational lens at the micro-level of clinical or research interactions and at macro-level discourses about occupation in our research, advocacy, and educational endeavors.

In this paper, we have drawn on our respective research to highlight what is gained by drawing on a diverse range of critical theoretical perspectives, demonstrating that these perspectives offer an important avenue for generating new insights and understandings of societal issues and opening up spaces to consider different ways to problematize and address such issues within and outside of occupational therapy practice. We assert that knowledge generated through critical theorizing has considerable potential to disrupt the status quo of power, knowledge, and practice-as-usual within occupational therapy and occupational science. Furthermore, we perceive the emancipatory mandate of critical social theories to be well aligned with addressing the gap between the call for social transformation through occupation and actual social change. In fact, we would go further to suggest that this mandate is unattainable without education, scholarship, practices, policies, and research that draw on a wide range and intersection of critical theoretical perspectives.

## Note

1. The term 'Indigenous peoples' refers to the original inhabitants of a region or territory, which in Canada is inclusive of First Nation, Métis, and Inuit peoples.

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