

Occupational therapy with the community: complexity, actions, and contexts¹

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Abstract: Introduction: Occupational Therapists have been building community-based actions, however, these have been little documented. Objective: To systematize the actions of the Occupational Therapist in community as part of the process carried out under the project “Contribution to the processes of social inclusion of people with disabilities through community participation in the commune 20” Cali, Colombia. Method: Exploratory-reflective study. Documentary analysis and interviewing were used as a data collection technique. Results: The process included four actions: the first, or baseline, made it possible to understand the needs of the population and the project readjustment; The second, the identification of key actors that have a social impact on disability issues; The third, visibility of disability as a social problem. In the fourth action, the capacity for action and self-management of a group of actors was accompanied and strengthened. Conclusion: Conceiving the subject from a social model, it made possible find needs and collective answers, accompany the group of people with disabilities in their identification as civic. Meanwhile, find the actions from a systemic approach involved to consider the interaction of different social systems and a look beyond the individual to the community.

Keywords: *Community Participation, Disabled Persons, Occupational Therapy.*

Terapia ocupacional en comunidad: complejidades, acciones y contextos

Resumen: Introducción: Los Terapeutas Ocupacionales han venido construyendo acciones con enfoque comunitario, sin embargo, estas poco se han documentado. Objetivo: Relatar una experiencia de acciones del Terapeuta ocupacional (TO) como parte del proceso desarrollado bajo el proyecto “Contribución a los procesos de inclusión social de las personas con discapacidad a través de la participación comunitaria en la comuna 20” de Santiago de Cali, Colombia. Metodo: Relato de experiencia relacionadas con las vivencias académicas-asistenciales. Las actividades se desarrollan en el marco docente asistencial entre el programa académico de TO de la Universidad del Valle y la Red de salud de Ladera de la Ciudad de Cali. El grupo estuvo conformado por tres estudiantes de práctica de TO, 1 docente de TO. Se concretó un grupo de 15 personas conformado personas con discapacidad y familiares. Además de la articulación con diferentes instituciones de la comuna 20. Resultados: El proceso comprendió cuatro acciones: la primera, o línea base permitió comprender las necesidades de la población y el reajuste del proyecto; la segunda, la identificación de actores clave que tuviesen incidencia social sobre asuntos de discapacidad; la tercera, visibilización de la discapacidad como un problema social. En la cuarta acción, se acompañó y fortaleció la capacidad de acción y autogestión de un grupo de actores. Conclusión: La adopción de un enfoque social, ecológico y comunitario, posibilitó ubicar necesidades y respuestas colectivas en un proceso en el que todos los actores fueron co-participantes.

Palabras-clave: *Participación de la Comunidad, Personas con Discapacidad, Terapia Ocupacional.*

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Terapia ocupacional com a comunidade: complexidade de ações e contextos

Resumo: Introdução: Os Terapeutas Ocupacionais vêm construindo ações com uma abordagem comunitária, no entanto, estas têm sido pouco documentadas. Objetivo: Relacionar uma experiência de ações do Terapeuta Ocupacional (TO) como parte do processo desenvolvido no âmbito do projeto “Contribuição aos processos de inclusão social de pessoas com deficiência por meio da participação comunitária na comuna 20” de Santiago de Cali, Colômbia. Método: Relato de experiência relacionada a vivências acadêmico-assistenciais. As atividades são desenvolvidas no quadro de ensino de assistência entre o programa acadêmico de TO da Universidad del Valle e a Rede de Saúde Ladera da Cidade de Cali. O grupo consistia em três estudantes de prática de TO e 1 professor de TO. Um grupo de 15 pessoas formado por sociedade civil, pessoas com deficiência e familiares, com reuniões semanais com duração de duas horas. Resultados: O processo compreendeu quatro ações: a primeira, ou linha de base, possibilitou compreender as necessidades da população e o necessário ajuste do projeto; o segundo, a identificação de atores-chave que tiveram impacto social em questões de deficiência; o terceiro, a visibilidade da deficiência como um problema social. Na quarta ação, a capacidade de ação e autogestão de um grupo de atores foi acompanhada e fortalecida. Conclusão: A adoção de uma abordagem social, ecológica e comunitária possibilitou localizar necessidades e respostas coletivas em um processo no qual todos os atores eram co-participantes.

Palavras-chave: *Participação da Comunidade, Pessoas com Deficiência, Terapia Ocupacional.*

1 Introduction

This paper aims to relate an experience of actions of the occupational therapist (OT) in the community, as part of the process developed under the project called “Contribution to the processes of social inclusion of people with disabilities through community participation in the commune 20” from Santiago de Cali, Colombia; within a practical subject of the Occupational Therapy program of the Universidad del Valle.

The group of people with disabilities shows a historical evolution of inequalities and social exclusion, which become tangible in the context of the experience based on data provided by the National Administrative Department of Statistics in 2005 (DEPARTAMENTO..., 2005), which show that, the participation of people with disabilities (PWD) in Santiago de Cali was restricted for cultural, civic, educational and productive activities, with the highest participation in family activities; situation that is reflected in the same way in the Commune 20th, where the poverty and vulnerability of the PWD become barriers for their social inclusion and access to social services such as health, education, work or recreation, among others.

Additionally, people with disabilities in the 20th commune face physical and attitudinal barriers to use public and private spaces, showing needs that warranted a response that would involve the community from the exercise of their rights. Here, the conception of community is a key because it is

understood not only as the collective organization of people in a territory, but rather that it requires a subjective element that enables the belonging, the existence of shared common meanings and an element of interrelation so there is a mutual influence between people (KRAUSE, 2001).

In this experience, the Occupational Therapist recognizes a knowledge about their weaknesses in the community but also about the opportunities to transform his realities through a collective work as stated by Maritza Montero (2012, p. 35), when she says that, in the community, we must work - from the specific problems of the community - on the field of *these stereotypes, of demotivation and negative self-images* - through self-managed and participatory processes, in which social situations of learning are modified that have generated helplessness, building other scenarios (TOVAR, 2001).

Also, he recognizes people with disabilities as subjects of rights, that is, capable of making decisions and participating in all spheres of social life under the premise of *nothing of us without us*, transcending a care response, focused on the pathology of the medical model (FERNÁNDEZ; GARCÍA, 2016).

In this sense, the dialogues created between the experience and the theory are guided from the Social Model of Disability that seeks to redirect the sense of disability and, above all, to the person who experiences it (PALACIOS, 2008). This model poses an individual and collective responsibility on the social transformations necessary to be able to participate in equal conditions in the different

spheres of civic life, without denying the biological condition of the people.

Thus, the Systemic Ecological Model is interested in establishing the relationship of the person with his environment and conceiving the occupation as

[...] an ecological process that must be understood from the exploration of the occupational behavior of individuals towards the configuration of systems of organization and occupational functioning of communities and groups (MÉNDEZ, 2011, p. 136).

Finally, another aspect of dialogue is the Community Participation conceived as

[...] an organized, collective, free, inclusive process, in which there is a variety of actors, activities, and degrees of commitment, which is guided by shared values and goals, in whose achievement there are community and individual transformations (MONTERO, 2004, p. 109).

2 Method

This experience was carried out in 2012. It was a community-academic practice with occupational therapy students of the last semester of the Universidad del Valle, Cali, Colombia. The students had the role of designing and executing an intervention project over a period of four months, with an intensity of 24 hours per week, in the territory of the 20th commune of Cali, where Universidad del Valle has been present for more than 20 years.

The experience was carried out under the existing teaching agreement between the Universidad del Valle and the Ladera State Social Enterprise (ESE), a decentralized public entity that provides health services in charge of the state. This agreement establishes that Universidad del Valle incorporates students and teachers in several devices of the network. For this reason, the group in charge had three students of occupational therapy and supervised by a professor of the Occupational Therapy academic program.

The city of Cali is the third most populated city in Colombia, with an urban territorial division by communes. The 20th commune of Cali is located on the hillside of the city, composed of eight neighborhoods and three urbanizations. It is considered one of the most vulnerable communes in the city. The socioeconomic stratum 1 (DEPARTAMENTO..., 2018) is the most prevalent (83.4%), and its inhabitants are mostly mestizo people. However, 12.6% of its inhabitants say they are Afro-Colombians (ALONSO et al., 2007).

The project was executed from three phases. In the first phase, the baseline survey was carried out with the objective of redefining the objectives of the project, knowing the needs and interests of the population. The second phase consisted of the call for actors and it was done in parallel to the first phase. The third phase was focused in a moment to work around the imaginary in front of the disability and in another moment to the accompaniment and strengthening of actors.

The actors that participated in the experience were organized into three large groups: organizations, civil society, and institutions.

In the first place, *The organizations* are groups that carried out actions for the People with Disabilities – PWD - in the 20th commune.

In the second place, *The Civil Society* is the group of people with and without disabilities, caregivers, relatives and neighbors of the community identified by participating in similar activities. The PWDs that participated in the project were mainly linked to one of the organizations of people with physical, auditory and intellectual disabilities in the 20th commune. People with hearing and intellectual disabilities were accompanied by their caregivers during the meetings.

Within this project, both the organizations and the civil society were a group of 15 people aged between 17 and 65 years old. The people who participated in this group were called through dissemination strategies and their participation was freely and voluntarily. Group meetings were held with them, which were weekly scheduled and lasted two hours.

Finally, the group of *The institutions* had the Committee of Planning of the Commune, public educational institutions, the Ladera ESE and the station of a cultural center of the commune and students of community practice of occupational therapy at the Universidad del Valle

3 Experience Report

From this experience, several actions were developed that will be explained below:

3.1 Action 1: starting point and baseline

The origin of the proposal was the needs detected after the participation in the diploma to redefine the Public Policy of care to disability in Santiago de Cali in 2011 (ESCUELA..., 2011). It is a training process funded by the Ministry of Development Territorial

and Social Welfare of Cali and executed by the School of Human Rehabilitation of the Universidad del Valle, in which the students of occupational therapy participated as university students interested in the subject of disability.

The results of the experience in this diploma showed that the PWD participating in the diploma did not feel represented before the municipal disability committee and, consequently, they were not satisfied with the answers given to their needs. There was the need to be organized in its most basic political structure, the commune to articulate the actions carried out by the municipal disability committee and have an impact on the implementation of the public policy on disability. For this reason, there was initially the creation of the Communal Disability Committee of 20th Comuna of Santiago de Cali, backed by Law 1145 of 2007 (COLOMBIA, 2007) established as a legal reference that enables its conformation in accordance with the territorial organization of the city of Cali.

However, a baseline was created to know the real problems of the PWD of the 20th commune and two problems were identified. Although they were consistent with the project, they led to rethinking the scope and methodology together with the actors to have some actions in accordance with the situation found and respond to their needs and interests:

In the first place, people with disabilities were in a situation of occupational injustice, (WILCOCK; TOWNSEND, 2000) because they did not have the opportunity to choose significant occupations (self-maintenance, work, leisure/free time) they could grant personal, family or community balance. In particular, none of the people with disabilities were working-related and the young people who were in school did it in “special education” institutions.

In the second place, people have an invisibilization of disability as a social phenomenon, because with and without disabilities in the community, they perceived disability as a deviation from normality, a deficiency and as such, an individual problem. For example, the adults with intellectual disabilities who attended the space, they were accompanied to the weekly meetings by their relatives, restricted their participation in decision-making.

Additionally, this baseline was implemented based on participatory strategies with the PWDs and their families and other actors linked to organizations and

institutions of the commune. Among the strategies used, there are:

- The documentary review and weekly discussion with the teacher adviser, in which the conceptual bases were established to approach the current situation of disability at the international, national, departmental, municipal and communal levels, as well as the territorial and political organization of the 20th commune;
- The semi-structured interviews with key informants in the commune;
- The return of information: the students showed the baseline report to the different actors (civil society, organizations, and institutions) and the co-construction of the objectives and work methodology were carried out.

This last strategy was one of the most representative. It consisted of an organized meeting of museographic exhibition type in a park of the commune. It had the participation of around 20 people, belonging to the different categories of actors (civil society, organizations, and institutions). This strategy allowed the recognition of the social reality of the PWD, as well as the feedback of the work carried out by the students, because with them, it was intended to build the process in such a way that they were the actors who would identify their expectations in front of the project and propose ways to proceed in a consensual manner (POLLARD; SAKELLARIOU; KRONENBERG, 2012). In this sense, the participation of the actors was promoted based on questions such as What do we do? What do we propose? and, Where do we start?

In this way, a work was started with the objective of deconstructing the collective imaginaries established through history and presented as barriers to the recognition and strengthening of PWDs as subjects with rights. At the same time, they could be strengthened as a base organization, generating “communicating vessels” between the different processes and actors, identifying and accompanying leaders and promoting the community participation of a base group that propitiates its own dynamics in accordance with its realities. That is, it was necessary to generate awareness and acquire political competence (POLLARD; SAKELLARIOU; KRONENBERG, 2012) for the construction from the bottom up, where the communal disability committee was a decision and not an imposition.

3.2 Action 2: calling for actors

This action was initiated to identify the key actors, belonging to the 20th commune, who interacted in it and carried out actions that had a social impact. To achieve it, the strategy of mapping key actors was used. From a list of possible actors in the territory obtained through a community leader, an approach was made with the objective of knowing their actions and their perception regarding the issue of disability in the commune. In addition, information was obtained about other actors interested in participating in the experience under the snowball strategy, since the same interviewees opened new contact networks. The actors identified were people from civil society, members of organizations and institutions.

The call for the actors became a cross-cutting strategy for the project. Every moment has the opportunity to include people in the actions aimed at contributing to the social inclusion of the PWD in the commune, but always with the affirmation that those who participated in the space would contribute in the recognition of the rights and dignity of the PWD and not with the expectation of a material retribution for the executed actions. The community participation is recognized as organizational action, free of a group of subjects, with the aim of generating processes of social transformation through a coordinated and committed work (MONTERO, 2004).

One of the spaces of the commune used throughout the experience to publicize the proposal and invite the actors that surrounded it to participate was the community radio station because it was sought to deal with topics of general interest related to daily life and specific situations of the common life. Also, one of its speakers was a young person with disabilities who, from his office, he managed to show the community the ability to participate in significant occupations like that one.

Additionally, the work of the community-based foundations is recognized in the call for actors, because thanks to their experience with the population, they were able to obtain the confidence of the people to attend the meetings and participate in the programmed activities. This action indirectly built and strengthened the link between the individuals that participated in it.

Inviting neighbors, friends, and acquaintances, offered the opportunity for people to recognize other subjects with the same interests, needs, and experiences, and managed to establish bonds of trust,

solidarity and respect as a basis for the relationships that were built there.

3.3 Action 3: visibility of disability as a social problem

The aim of this action was to recognize disability as a social problem that is not based on the individual limitations but in the limitations imposed by society to provide appropriate services and to ensure that needs are considered within the social organization (PALACIOS, 2008).

To achieve it, there was a working group with 15 of the actors (civil society, members of organizations and institutions) who participated in the construction of the objectives and work methodology in the return of the information of the baseline, as its participation was a way of organizing the transformations that were expected in the face of disability in the 20th commune.

With them, weekly meetings were held, in evening hours according to the availability of the assistants (community actors, students, and teacher). Strategies were implemented such as: the reflective reading of the convention on the rights of the PWD; the identification, experimentation and discussion of everyday exclusion cases; the construction of posters and folders for the visibility of the group and the presentation of similar experiences of other social movements in international, national and local contexts, as well as the organization of a snack from the contribution of each of the attendees. The refreshment became a space for listening among the participants about daily situations that happened during the week.

When trying to be consistent with a participatory and community perspective, the students of occupational therapy generated the necessary support during each activity so the participation of all the attendees was possible. Relationship supports were specifically implemented such as questions, reformulations, dialogue, repetitions, new elaborations and interpretations, and support in the activity as adaptation in the contents, objectives and graphic presentations (OSORIO; PERDOMO, 2014), which allowed the reaffirmation of social bonds through dialogue and affective exchange. The joint action and dialogue between the students, the teacher and the participants of the project favored the loss of the fear to express opinions and configured in the participants a new way of recognizing in the other, their capacity of contribution.

It was a process in which the voice of each one of the participants took place and allowed to know the experience and the meanings they gave to the disability. In this sense, during the process, the students received tutorials from the teacher, with the aim of analyzing the speeches from the complexity of their personal and collective histories and their contexts (GALHEIGO, 2012).

Also, actions were carried out in other spaces of the social system. The Municipal Health Secretary was one of them. A review and theoretical discussion was carried out by the students of occupational therapy and the teacher, about the variables of the integrated information system of social protection (SISPRO) showing a reductionist view of health, focused on the dysfunction. As a result, a change proposal was elaborated, under a theoretical referent that would allow a better understanding and obtaining of disability information, which is used to make decisions that support the elaboration of policies and the management of services of the sector.

Some educational institutions in the commune were another area in which actions to raise awareness of disability as a social. Schools were conceived as one of the main contexts for the socialization of people, which could allow the conception of disability to be introduced as a matter of rights and capabilities, within their policies, cultures, and practices. The second film-forums strategy was used with the fourth and fifth-grade students of the morning session (children between 9 and 12 years old). Two film forums were held per grade; the first allowed identifying students' understanding of disability, which was focused on the deficiency. The second film-forum problematized this conception, so a transformation of imaginaries could be initiated from a perspective of a limited body to a perspective that considered disability as a social construction.

3.4 Action 4: monitoring and strengthening of the actors

Throughout the project, the social situation of disability in the 20th commune was recognized; the involvement of the actors in the search for alternative solutions that improve the identified problems was encouraged.

One of the actions consisted of the participation of a representative of civil society and the students of OT to the monthly meetings of the planning committee of the 20th commune, a space for political

participation in which decisions are made on the design and execution of projects for the commune.

The objective of participating in this space as guests with opinion required work on the skills of action and self-management of the group of actors, as well as the recognition of the ability to participate in the political life of their communities. This was a process achieved through access activities and analysis of existing legislation on disability; the strengthening in decision-making, citizen competencies, and qualification in the construction of social action projects through techniques such as the problem tree. In this way, the role of the occupational therapy students was as an *articulator* to management processes and not as an *adapter* (GALHEIGO, 2011, 2014; FREIRE, 1981).

However, not all the people in the group were in the same conditions of participation. Some of them proved to have characteristics of a community individual such as a clear sense of their identity, an intrinsic will to move in different spaces of participation, more social awareness and permanent assistance to discussion forums. The identification of these attributes was possible through the observation of the attitudes in the discussion spaces, because those people with the ability to lead were able to listen to the opinion of the other without attacking it, to participate, to think about the group as a whole, without individualism and to propose alternative solutions to the identified problems, such as knowing issues that have more applicability in the defense of rights such as writing protections and knowing the legislation to use it to their benefit.

With this group committed to the aforementioned actions, there was a space for attendees to share experiences in the search to build themselves in interaction with the other, and to enrich the process through acceptance and tolerance for difference and diversity, obtaining an organizational dynamic that moved away from the planned processes, directives and previous assistance.

Finally, it is important to highlight that for these actions to be possible in the beginning, the OT students had to contribute with material resources that they did not have and travel with them from the University to the commune. Then, when the people of the community were able to recognize their work in the territory, that is, establish bonds of trust over the actions taken, this situation changed; because they generated the necessary conditions for execution. However, there were always economic

difficulties for the displacement to the meeting place, the permanence of a welfare view in some participants and low levels of education, which complicated situations such as discursive handling and access to information, fundamental points for the decision making.

4 Discussion

4.1 What glasses do we wear to observe the subject?

The glasses decided to observe the subject show the relationships established and the actions built (ZANGO MARTÍN; MORUNO MILLARES, 2013). If Biomedical glasses are chosen, the conception of the subject will be focused on the pathology, the deficiencies and the inability to build solutions beyond the improvement of their health condition. If the biopsychosocial model is chosen, the individual will be considered as a biological, social, cultural and spiritual unit in continuous relationship with the environment, which results in actions that fall on the person's ability to face the changes that occur in his personal capacity and in the vital circumstances (ZANGO MARTÍN; MORUNO MILLARES, 2013). However, if it chosen to wear glasses with a more political and social view, it will allow to understand the PWD from its uniqueness and actions will be directed to make social changes that promote access and opportunities for all people through the identification of their place as citizens, in the strengthening of their voice (DÍAZ, 2009; BRAVEMAN; BASS-HAUGEN, 2009), and in the discovery of basic references such as solidarity, participation and cohesion (PINO; CEBALLOS; SEPULVEDA, 2015).

This experience was carried out within the reference of the Social Model of Disability that proposes a concept of health from the perspective of human rights. A perspective that allowed questioning the academic training by the students of occupational therapy, linked and influenced mainly by the biomedical model. That is, it allowed transcending the consideration that problems have a base and an individual solution so both the problems and reality must be analyzed from the complexity of the contexts in which they are produced (GALHEIGO, 2012). In this sense, it was possible to understand that the response to disability is an intersectional

issue, which is why the responsibility of different actors is beyond health professionals.

However, the deconstruction of the disability imaginary located in the limitations of the person was not an easy task in the work with the participants of the experience (community-based actors, PWD, their relatives and representatives of social services). Pino et al. (2015) state that people are so used to being subsidiaries of the state through paternalistic actions, that they manage to build an identity in which they are conceived as deficient and assist individuals, which becomes a challenge for OT community because there is a difficult transition towards the construction of identities as community individuals (ROZAS, 2014).

Even so, discussing and sharing with others who do not have disabilities, but who were involved in the process, such as social institutions, involved a conversation and the re-signification of the life stories of the PWD from the every day, from the walk of the neighborhood, ask for the appointment, and go to school. This re-meaning of life stories was mediated by the dialogue, which was not intended to transmit knowledge about disability, but the objective of problematizing disability with denaturalizing, desideologizing and conscientizing strategies (MONTERO, 2007). Thus, to enable a liberating and critical learning about the disability that interpellate the exclusion circumstances that the daily thing was developed.

Therefore, it is possible to state that changing glasses is a process under construction. As the PWDs and their families are assumed as individuals of rights and occupational therapists continue to question traditional normalizing practices, social transformations will cease to be a possibility to become a reality.

Thus, the construction of individuals of rights will allow the performance of actions for the objectives contributing in the elimination of barriers for the social inclusion and the elimination of a hopeless view configuring the assistentialism. On the other hand, to the extent that professionals manage to link their actions with community participation and citizenship, from models such as the Social Model of Disability, they will contribute to the PWD collective transcending welfare positions and access, through right, to the consolidation of citizens with full duties and rights.

4.2 How do we build with the “intervention”?

Occupational Therapy with a distance from the traditional and hegemonic views of the subject, increasingly shows the intention to show other ways of doing that respond to the contextual logic of the countries of the South (CANTERO et al., 2015; GUAJARDO; SIMÓ ALGADO, 2010). The need to respond to situations of social exclusion, violation of human rights and social injustice has led to the creation of forms of work supported conceptually, in categories different from the hegemonic ones promulgated by the North (GUAJARDO, 2016). As stated by Santos (2009, p. 12) “[...] there will be no global social justice without global cognitive justice”. This implies that one of the challenges of Southern Occupational Therapy is to build and document our practices and knowledge; it is to generate knowledge from our realities.

Those practices and knowledge that emerge with an intention to transform and break the traditional are created in the OT Community. The Occupational Therapy Community requires some ways of understanding and doing, assuming the action guided by a speech “of horizontality”, by the construction of a subject with capacity of agency and holder of knowledge that is a product of its history, culture, and everydayness. This experience in community with PWD was an example.

Since its beginning, the OT has aimed at the welfare and health of the population through occupation. However, the dynamics of the contexts and the problems that emerge in them have required a systemic perspective in the work with the community that considers social, economic, political and cultural aspects of the occupation.

This perspective invites a change in the view of the O.T. (SANZ, 2016); it opens the door to a way of intervening that enables the joint action of the individuals towards the construction of transformative actions of macro-social conditions of inequality and violation of rights.

Understanding the actions from a systemic-ecological approach enabled to configure the disability as a phenomenon with multiple edges that goes from the individual level, passing through the family and affecting social and cultural relationships. When the O.T. assumes this approach to work, it is faced with giving collective answers to the socio-occupational problems that the PWD group lives. Also, it leads him to build answers thinking not only about the aspects that PWDs live in their

micro-contexts, but also it considers environments where interrelationships occur such as school, work, neighborhood (mesosystems) and, even more, it understands the dynamics and tensions of the economic, political and cultural systems of the city (macrosystem) (BRONFENBRENNER, 1987). It is an understanding that allows seeing the synergy between the local and the global.

The initiative to configure the actions led to the principle of community participation where the horizontality, the hand-to-hand work between the professional and the community, and the commitment, had the transformation of situations of exclusion and inequality as a project in which the PWDs of the 20th commune are maintained.

Considering the community participation as the basis of actions, there was a OT interested in contributing to the construction of the community, in which identity, solidarity, the establishment of affective bonds and the recognition of the “Other” as an individual of rights, there was a new view of the community (GARCÍA-RUIZ; QUINTANA, 2015). In this way, horizontal or symmetrical relationships were established in meetings with community individuals that were not conceived as

[...] the simple addition of people, but rather as a set of individuals that are articulated in a certain way, where there is social cohesion, identity, collective goals and social conscience [...] that participate in the general social sphere of society (ROZAS, 2014, p. 113).

The process created was where all were co-participants, and in which the knowledge, both of the professional and the occupational therapist, enriched the collective action and did not have the individual interests as an objective.

The adoption of a perspective of community work meant an arduous task that implied important changes from the rationalities of the individuals involved in the process. The presence of a traditional perspective was shown in the parties through directive and institutionalized expressions. On the one hand, the conception of students as expert interveners guided by an academy that seeks scientific in all aspects, and in which a technical nature stands out when considering social intervention as

[...] a service of planned procedures that facilitate processes and they improve the capacity of the community in the multiplicity of problems that arise in it (FLORES, 2011, p. 68).

On the other hand, a community with a welfare view built on previous experiences, but with the presence of some critical subjects who demanded a “participant” rather than a “participatory” position (MONTERO, 2012), changing the methodology proposed.

The situations presented led to the reflection of the actions, which resulted in the location of the parties on the other side of these speeches and the beginning of a process of deconstruction of these ideologies in the daily life of the commune. That is, the dynamics evidenced in the contexts determined the forms of participation and professional actions.

5 Final Considerations

Monitoring the problems of the PWD as a group involved changing the traditional ways of doing Occupational Therapy. That is, the different actors of the community in the planning and execution of the proposal was considered, articulating individual and collective interests, as well as the establishment of an ethical and political stance against the work done, which led to generating agency in the participants; visible in the cohesion they had with the process.

In this sense, this intervention allowed understanding that, as professionals, we must have a reflective process about our actions, ask ourselves where they are headed and from what epistemological position they are sustained, so there is coherence between theory and practice (KRONENBERG; SIMÓ; POLLARD, 2007). Otherwise, we will continue exercising a traditional Occupational Therapy, based on the expertise and asymmetry, and we will continue to obtain palliative results and not to transform the reality that the community lives.

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