

Editorial

Are we attending to social needs or promoting social agendas?

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How to cite: Urbanowski, R., & Cruz, D. C. (2025). Are we attending to social needs or promoting social agendas? *Cadernos Brasileiros de Terapia Ocupacional*, 33(spe1), e2502.
<https://doi.org/10.1590/2526-8910.ctoED332025022>

The theme of this special issue is leadership and knowledge innovation in occupational therapy. We understand leadership beyond and away from the capitalistic values that include but are not limited to productivity, quantitative measures, managerial roles, and “value for the money” that govern most of the systems and services we work or should access in society. Aligning with Backman (2022), we agree that leadership is not about having a title, being perceived by others as an authority, possessing power and some specific features and personal attributes. Still, its focus relies on social changes and recognizing the role of teams and collectives. Therefore, having an outcome or need for action opens the doors of leadership to each of us, and citing an outcome or reason for action encourages leadership to everyone acting in their circle of influence that goes from our micro, meso and macro levels (Backman, 2022).

The other keyword is innovation. Leadership in innovation in occupational therapy is about new and novel ways of doing, being, becoming, and belonging. Using these four dimensions of occupation from Wilcock & Hocking's (2015) work, we want to creatively expand these concepts and apply them to the theme of our special issue.

Innovations in *doing* include using digital technologies, developing new protocols for old issues, and challenging the structural barriers to equity, and occupational participation for the people we work for—our clients, our patients, our colleagues and our communities. Questions we can ask are: What is our role? What matters to people who have the right to participate in the world? To answer these questions, we need to consider the influence of structural factors, policies, and the economy on what people can do and what choices they have (Galvaan, 2012) and the diversity of vocabularies, histories, and cultures in occupational therapy (Malfitano, 2022).

The actual world landscape challenges occupational therapists to enact their leadership and innovation for the problems society is facing. The scenario of Artificial Intelligence affects not only our work but also our very nature. While occupational therapists are concerned with social issues that barrier people's everyday life and their participation with meaning (Malfitano et al., 2020), some countries are starting with the discussion on assisted dying. However, our role and contribution to it is still a dilemma that has not been clarified. Current world problems such as wars, extremist and authoritarian political ideologies, climate change, floods, natural disasters, and sustainability issues appear to be some of the challenges occupational therapists should

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embrace toward social transformation against occupational injustices. When considering innovative leadership, we must ask ourselves: Are we doing our best to demonstrate our contribution to improving people's lives?

Leadership innovation in *being* means moving away from reductionist models that promote people as parts that constitute a whole. Key elements of being include identity, subjective experience regarding activities or occupations, connection with others, and engagement in meaningful occupations. The hegemonic patterns of Occupational Therapy theory that propose a universalistic ideal need to be questioned. We need to value and respect different ways of being in the world, and to do so; we need critical reflexivity if the activities we are engaging in are compatible with whom we are according to our profession's mission. Engaging in critical reflexivity will free us from the bounded rationalities of self-awareness and positionality analysis. For instance, embracing one-health concepts would support innovative ways of being. Developing insight into how our ways of being may contrast with the system we live in and the system in which the people we work for live. New ways of moving us away from the old worn-out scholarly rhetoric of rehabilitation, medical modelling, and health and into new dialogue regarding context-centred care, relational models of living, and new forms of integrated personal and community well-being (Biddle, 2012; Mello et al., 2021).

Leadership and innovation in *becoming* require us to step back to think about what we want for our future. It embraces notions of change and transformation beyond the individual level, shifting the focus on disease, disability, and moribund forms of existence (Clark, 2005). Occupational therapy innovation focuses on change and adaptation beyond the temporal point of care to include the person's life trajectory in their context. It involves notions of soft and hard power and agency as essential to any occupational therapy intervention (Clark et al., 2019). Innovative occupational therapists engage in epistemic fluency, defined as our ability to navigate, collect, utilize, and evaluate different forms of knowledge and understanding across various cultural and social horizons. The novelist Haruki Murakami states, "Truth is not found in fixed stillness but in ceaseless change and movement. Isn't this the quintessential core of what stories are all about?" (Murakami, 2024, p. 449). Perhaps the same holds true for occupational therapy that is committed to truth to power and helping others live meaningful dynamic lives.

Leadership in innovation in *belonging* include new ways of gaining social acceptance, fostering inclusion, nurturing inclusion in context, and developing personal notions of purpose (Park & Gutierrez, 2013). The concept of belonging invites us to think and act as a collective. Likewise, occupational therapists seek new ways to create and support meaningful engagement, community living and participation. The development of hybrid living in both face-to-face and digital worlds makes it necessary to acquire new skills and attributes in communication and identity formation.

To be genuinely humans, we must recognize and act upon our reality (Freire, 1970). If we want a profession that will flourish in its potential, it is now or never to plant the seeds for our future leaders. We hope this Special Issue can foster an understanding that leadership in innovation in occupational therapy can promote changes through different pathways. As such, occupational therapists can continue to develop new conceptual models, knowledge of leadership roles, and innovation in various technologies to support practice and the populations we serve.

Being a leader in innovation means exercising critical reflectiveness, understanding contextual awareness, active engagement of others in designing social action agendas, a commitment to creating impact and most importantly demonstrating an irrefutable commitment to change. Whether we are attending to social needs or promoting social agendas with our leadership roles remains a question to be answered. In order to meet our social obligations as occupational therapists, we need to be cognizant that if we do not create spaces for dialogue on issues that matter to humankind and if we do not provide leadership in innovation on resolving or meeting those matters, we have failed as a profession.

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