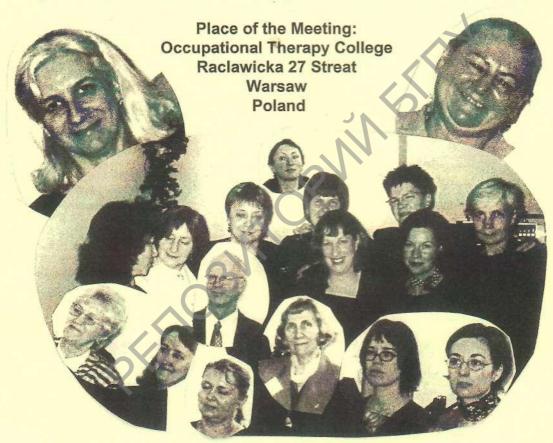


## Occupational Therapy Education Developments in East and Central Europe Consequences of Bologna?

Report of the ENOTHE Meeting 20th and 21st of April 2001



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Granted by: European Commission, ERASMUS, Thematic Network Programme

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## **CURRICULUM DEVELOPMENT IN BELARUS**

## Tamara Varenova, Byelorussian State Pedagogical University

At the first of all I'd like to thank the board of ENOTHE and the organisation committee in Warsaw for an invitation to take part in this meeting. I hope to meet new approaches to break out maybe the same difficulties and barriers in spreading OT ideas in the countries of East Europe. As we learn the differences in our cultures and customs we also begin to appreciate many important ways in which we are good alike or maybe shall be alike.

New norms are being developed for higher education in Belarus to make it more compatible with international systems and to bring it into line with the demand for new types of specialists in all spheres of society and for alternate models of study.

The theme which was discussed before at the congress ERGO 2000 in Paris «From diversity to harmonization in systems of care in Europe. Toward a more just health» is very important for every country and for the Republic of Belarus especially. There are some as historical and actual reasons.

In the Curriculum Framework Working Group (Salford University, Rona Howard) there are two definitions of OT: WFOT and COTEC. I consider a definition must be enough full but brief. For a example: *Ergotherapy – theory and practice of the development person's psychophysical functions through engagement in occupation with a wide environment to be flexible on different life's challenges.* In a deprived country it takes great courage just to face the challenges of each new day. A big part of local population is frustrated, tired and sick. And occupational therapists would be play a useful role in this problem too. At all I consider ergotherapy is one of the most important human's field of knowledge in the XXI century.

I agree with educational philosophy of OT and I am sure that it must be common for every region but the ways of practice maybe different according to ethic's culture. To my opinion, it would include some important statements in educational philosophy of OT: correlation biological and social, mental and affective spheres, process compensation and development of the Central Nervous System.

The term «ergotherapy» is not known well in Belarus and I try to do all my best to make this branch of knowledge famous. I am finishing a big article about history and modern theory and practice of occupational therapy in the world for Byelorussian scientific journal «Defectology» and a large wall-paper with a lot of pictures and a bit written information at our faculty has been made some months ago. So almost every first-year student knows what is it ergotherapy. It's a pity I can't say the same about some official persons. They take the word «therapy» very concretely only as a treatment with medical aids. Linguistic problem is determined another some difficulties in understanding: such words as «occupation» and «intervention» are using in Russian at the first of all in a military sense. I keep in touch now with Ingrid Pahlsson, 'grand madam' of ergotherapy from Denmark and she says they had the same problems in public recognition at the beginning of establishment OT there.

There is not while OT education in Belarus. It is planning to start this kind of education at Defectology Department of our University. Training of special educators is approved according to multi-level system. Its necessity is due to upto-date requests to an educated specialist in whole and to a practical special educator in particular. If we compare core curriculum in Defectology and OT we'll be able to find many common aims, aspects and ways. Special education as OT is the field where interdisciplinary approach and wide exchange of international experience is needed very much. The latter is based on the common problems but different aids of their solution.

Three main ideas are realized in a current curriculum of special educators: fundamentalisation, integration and psychologisation. Its content reveals in culturological, professional, technological and methodological aspects. So new approach to training of special education is able to maintain mobility and adaptation of a young specialist to social and economic changes in society.

The distinguishing of the generally basic step in training of a specialist on mental disorders and physical handicaps helps to solve this task. This step gives the student essential knowledge of three study's blocks: medicine, psychology and pedagogic. The main *medicine's courses* are next - anatomy, physiology and pathology of a man, neurophysiology and neuropathology, sensor's systems, psychiatry and patopsychology, clinic of mental retardation. The *psychological block* is also wide. It contents different subjects: general psychology, psychology of development and personality, social psychology, common special psychology and with different branches according certain groups of disabled children. There are presented some branches of general and special education and teaching at the *pedagogical block*. The students pick up notions of all types of disabled children during 2 years, gain basic experience in dealing with such subjects with following deep specialization in one out of four main directions during 3 years:

· hearing impairment;

- vision impairment;
- · mental retardation;
- · speech and language difficulties.

At the first of all students have practice at the places which belong to Ministry of Education and less Ministry of Health Care and Social Defense. If speak about kinds of clinical placements our students follow to psychiatry departments, clinic of pathology of hearing, voice and speech, pediatric polyclinics.

As usually every person with our university's diploma in defectology has two qualifications in mentioned above directions (for example, oligofrenopedagogic and logopedia) and some of the graduated students have also a right to work in general primary and nursery schools with normal children.

I include some items of OT in content of Correctional Teaching (Special Pedagogic). Students meet ergo equipment in catalogs and special centers, make simple facilities, work out «ergo route» since morning to evening (getting up to walking outside).

I support relations with people who carry functions of occupational therapists in some special centers in Minsk and Gomel. They had short training in abroad. There is not until national OT association. We have some foreign links. So there is a German association Ergo- Belarus e.V. They help us with literature in OT, suggest for translation here Bayer's curriculum as a basic for Belarus. Together with Ulrike Dürrbeck we have worked out 3 models with different versions of OT education in Belarus:

- 1. Postgraduate course for people with diploma in medicine, defectology and physical rehabilitation.
- Including OT in training of special educators at Pedagogical University and of physical rehabilitates at Academy of Sport.
- 3. Intensive workshops for specialists who work with handicapped.

The biggest obstacles in the development of OT education are in 'psychology' of ministers: all who will work and respond are agree, who must put only their signature to include a new item «ergotherapist» in the state's professional list, they are between «yes» and «no». So Ministry of Education says: «Pedagogical University must teach but don't treat», and Ministry of Health Care: «It is not our problem!». Nevertheless there is a hope to reach a compromise. It is ready the qualification's requirements for an educator in rehabilitation and the substantiation for this specialization in student's training.

We expect from ENOTHE to get information about examples of good practices in the Central and East Europe, some assistance in choice of reasonable model and curriculum, co-ordinating of the work.