E-Poster

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A Comparison of Japan and the Dominican Republic from the Occupational Therapist's Perspective –Through Volunteer Activities in the Dominican Republic–

Topic: Miscellaneous

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BACKGROUND

I participated in the Japan International Cooperation Agency Overseas Cooperation Volunteers and was dispatched to the Dominican Republic (DOM), for two years and two months from 2022, where I worked as an occupational therapist. During my activities, I learned about the inadequacies of the DOM in terms of medical care and welfare, differences in nursing care, and differences in activity of daily living (ADL) due to differences in cultural backgrounds. By clarifying the differences in ADL and cultural backgrounds between Japan and the DOM, the project will be useful for rehabilitation and occupational therapy needs in developing countries.

METHODS

Focusing on my volunteer experiences and activities in the DOM, I summarized the differences in ADLs and assistive devices from an occupational therapist's perspective, as well as the needs of occupational therapists and the nature of their care.

RESULTS

In the DOM, the medical system is inadequate, and the ratio of occupational therapists per population is one-tenth that of Japan, and I felt that there were issues with occupational therapy and support for daily life. On the other hand, Japan, a developed country, has a well-developed healthcare system but also faces the challenge of a declining birthrate and aging population, and we learned that even developed countries have their own challenges. Comparing Japan and the DOM, I learned that the differences in ADL due to cultural backgrounds, lifestyle habits, and social backgrounds such as traffic conditions and an aging society, resulted in different diseases, rehabilitation needs, medical systems, and support methods such as nursing care. Therefore, disease prevention methods and rehabilitation interventions should be tailored to each country. Although it is important for occupational therapists to intervene and improve the quality of life, there are people who do not have security and safety in their lives or access to minimal medical care due to security, inequality, and poverty. Therefore, we believe that occupational therapy should be based on an environment that ensures the security and safety of people's lives and provides access to a minimum level of medical care.

CONCLUSION

There are countries in the world where occupational therapy is not yet established. This may be due to problems with the situation, health care system, public health, poverty, and low need. In the future, we would like to clarify the state and needs of occupational therapy in developing countries.

Statement of Disclosures

None

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