



# OCCUPATIONAL THERAPY IN ACTION: PRESENTE ATTIVO, FUTURO SOSTENIBILE

RIMINI, 25 OTTIBRE

#WORLDDOTDAY



PATROCINATO DA



**DOTT.SSA GABRIELLA CASU – PRESIDENTE AITO**

**“OCCUPATIONAL THERAPY PROMOTES HEALTH AND WELLBEING BY SUPPORTING PARTICIPATION IN MEANINGFUL OCCUPATIONS THAT PEOPLE WANT, NEED, OR ARE EXPECTED TO DO.” (WFOT,2025)**





Updated 7 October 2025

## PUBLIC STATEMENT

# The Protection of Occupational Therapists and Access to Humanitarian Aid

The World Federation of Occupational Therapists (WFOT) expresses deep sorrow when members of the occupational therapy community lose their lives in situations of conflict, disaster or humanitarian crisis. All occupational therapists, regardless of national affiliation, are part of our global professional community. We honour their dedication to promoting health, dignity and participation, and recognise the profound loss to their families, colleagues and the people they serve.

WFOT recognises the vital role of humanitarian aid in ensuring equitable access to health systems for vulnerable populations. It provides essential care, supplies, and support for communities affected by conflict, natural disasters, and public health emergencies. WFOT supports actions that facilitate safe and effective humanitarian response and works with international partners to promote access to health and rehabilitation services.

WFOT reaffirms that health and rehabilitation professionals must be protected under international humanitarian law. Humanitarian aid is essential to saving lives, providing food and shelter, and helping people regain stability through participation in daily life. Occupational therapists understand the importance of engagement in everyday activities to meet basic needs, support mental health, and build community resilience and recovery.

WFOT advocates for the recognition and protection of occupational therapists in their professional roles, in accordance with humanitarian and ethical principles.

WFOT condemns any actions that obstruct or endanger the delivery of essential aid. Those providing and receiving assistance must be protected from harm. WFOT calls for full adherence.

## Art. 52 Obiettivi

Il Terapista occupazionale, mediante i propri interventi, incentiva, riabilita e promuove l'autonomia, l'indipendenza, la partecipazione, la salute e il benessere della persona.

Gli interventi del Terapista occupazionale comprendono l'identificazione e il mantenimento di un'identità occupazionale per la persona che ha, o è a rischio di sviluppare, una limitazione delle attività o una restrizione della partecipazione.

Il Terapista occupazionale, secondo le proprie possibilità e per quanto di propria competenza, si adopera per una società che riconosca i diritti di ognuno alla partecipazione alle occupazioni desiderate, necessarie o attese.

### Quando curare diventa resistere: per Omar, per Gaza

Quando curare diventa resistere: per Omar, per Gaza Abbiamo appreso, in queste ore, della morte di un collega operativo nella striscia di Gaza con Medici senza Frontiere.

AITO / Oct 13

### Conflict Watchlist 2025

Crisis areas that will evolve in the coming year



Summary

Information was collated from 102 WFOT Member Organisations (98% of those surveyed). The figures below reflect the responses provided by these organisations.



680,162

Practising occupational therapists

1,036

WFOT approved education programmes

368

Non-WFOT approved education programmes

2.5

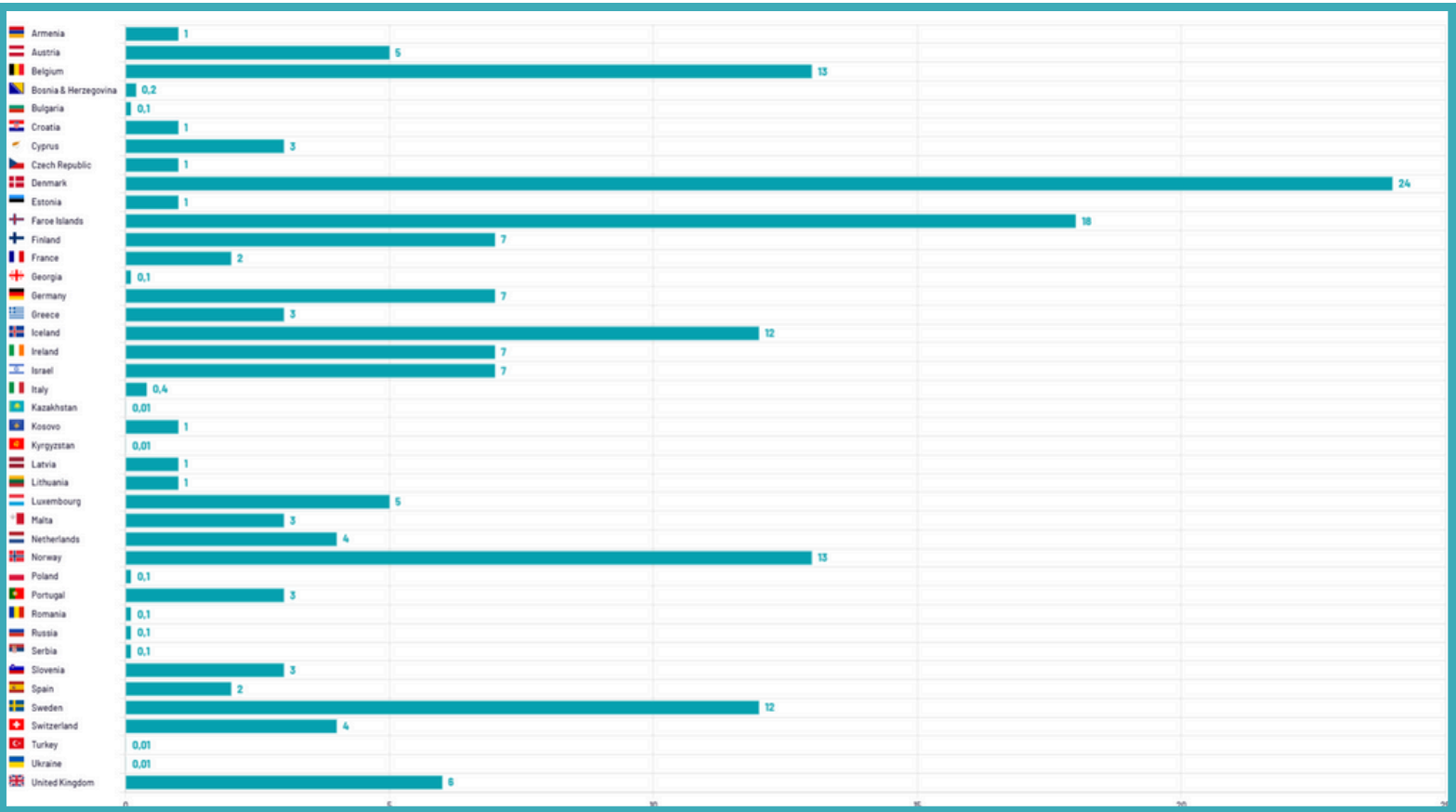
Occupational therapists per 10,000 population (mean)

126,936

Students in WFOT approved programmes

66,967

Occupational therapy assistants



Practising occupational therapists per 10,000 head of population

Areas	Italian Regions	Registered OTs	Total Populat	OTs per 100k	Expected WFOT	Gap WFOT	RelGap WFOT (%)	Expected EU	Gap EU	RelGap EU (%)
BOLOGNA	EMILIA ROMAGNA	20	1005000	2	7.540	-7.340	-973	3.190	-2.990	-937
FERRARA		0	349000	0	2.620	-2.620	-1.000	1.110	-1.110	-1.000
FORLI-CESENA - RIMINI		7	714000	1	5.360	-5.290	-1.000	2.270	-2.200	-969
MODENA REGGIO EMILIA		118	1603000	7,4	12.020	-10.840	-1.000	5.090	-3.910	-768
PARMA		9	452000	2	3.390	-3.300	-1.000	1.440	-1.350	-938
PIACENZA		5	289000	1,7	2.170	-2.120	-1.000	920	-870	-946
RAVENNA		1	384000	0,3	2.880	-2.870	-1.000	1.220	-1.210	-992

Tofani



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WORLD HEALTH ORGANIZATION  
ORGANISATION MONDIALE DE LA SANTÉ  
WELTGESUNDHEITSORGANISATION  
ВСЕМИРНАЯ ОРГАНИЗАЦИЯ ЗДРАВООХРАНЕНИЯ  
REGIONAL OFFICE FOR EUROPE  
BUREAU RÉGIONAL DE L'EUROPE  
REGIONALBÜRO FÜR EUROPA  
ЕВРОПЕЙСКОЕ РЕГИОНАЛЬНОЕ БЮРО

Head office:  
UN City, Marmorvej 51,  
DK-2100 Copenhagen Ø, Denmark  
Tel.: +45 45 33 70 00; Fax: +45 45 33 70 01  
Email: [eurocontact@who.int](mailto:eurocontact@who.int)  
Website: <https://www.who.int/europe>

Honorable Minister of Health,  
Republic of Italy

Subject: Strengthening the Interdisciplinary Rehabilitation Workforce for Universal Health Coverage

The World Health Organization (WHO) recognizes that a **competent, interdisciplinary rehabilitation workforce** is essential for achieving Universal Health Coverage (UHC) and meeting the health needs of all populations, particularly in the context of demographic changes and an ageing society. Rehabilitation is a core health strategy, integral to improving individuals' functioning, autonomy, and social inclusion, as reaffirmed by the World Health Assembly Resolution 76.6 and the commitments made at the recent G7 Health Ministers' meeting.

The **rehabilitation workforce**<sup>1</sup> encompasses a range of professions, including of **audiology, clinical psychology, occupational therapy, prosthetics and orthotics, physiotherapy, and speech and language therapy, as well as by rehabilitation specialists in medicine (physical and rehabilitation medicine or physiatry) and nursing (rehabilitation nursing). In addition, the rehabilitation workforce often encompasses rehabilitation assistants, technicians and community-based rehabilitation workers, or other health occupations delivering rehabilitation interventions.** The precise composition and roles of this workforce should be tailored to national needs and contexts, as determined by your ministry in collaboration with relevant international professional bodies including but not limited to the World Federation of Occupational Therapists (WFOT), World Physiotherapy and the International Society of Physical and rehabilitation Medicine Doctors.

For example, the Italian Association of Occupational Therapy (AITO) highlights the vital and irreplaceable role of occupational therapists within rehabilitation pathways, both nationally and internationally. Recognized by the WHO and aligned with EU standards, occupational therapy contributes significantly to promoting autonomy, improving quality of life, and supporting individuals with functional limitations across the lifespan. Despite its strong evidence base and international recognition, the profession in Italy could face challenges due to limited educational programs, uneven regional access, and potential reforms that risk undermining its disciplinary autonomy. Strengthening occupational therapy education, research, and workforce integration is essential to ensuring high-quality, person-centered care and aligning Italy's health system with global best practices and European directives.

<sup>1</sup> <https://www.who.int/teams/noncommunicable-diseases/sensory-functions-disability-and-rehabilitation/rehabilitation/workforce>

UN City, Marmorvej 51  
DK-2100 Copenhagen Ø  
Denmark

Email: [kianis@who.int](mailto:kianis@who.int)  
Website: <https://www.who.int/europe>

Date: 11 July 2025

To support the process of strengthening this interdisciplinary workforce, WHO offers the **Guide for Rehabilitation Workforce Evaluation (GROWE)**<sup>2</sup>—a comprehensive set of resources for evaluating and planning the rehabilitation workforce at national or subnational levels. GROWE supports stakeholders in:

- Assessing the current status and needs of the rehabilitation workforce
- Identifying gaps and opportunities for development
- Formulating actionable recommendations and strategic plans
- Establishing robust data and monitoring systems

The Ministry of Health in Italy is most welcome to engage with WHO Europe for **technical support as we are here for that**, including supporting you to conduct a GROWE assessment or other tailored assistance, to strengthen your rehabilitation workforce planning and integration within the health system. This process can help ensure that Italy's rehabilitation workforce is optimally equipped to deliver high-quality, accessible services in line with UHC and the Sustainable Development Goals.

For further information or to initiate technical collaboration, please do not hesitate to contact me at [kianis@who.int](mailto:kianis@who.int). I very much look forward to supporting Italy's Ministry of Health in advancing rehabilitation as an essential component of health for all.

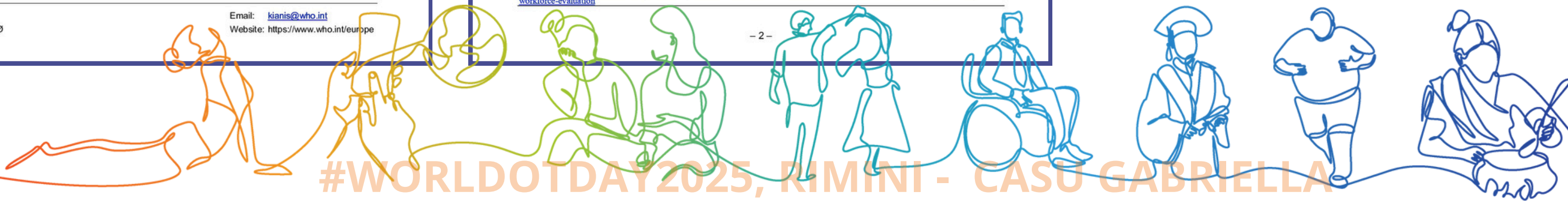
Grazie mille,

Ms. Shirin Kiani  
Technical Officer  
Disability, Assistive Technology, Rehabilitation, and Eye/Ear Care  
Health Workforce and Service Delivery Unit  
Division of Country Health Policy & Systems  
WHO Regional Office for Europe

<sup>2</sup> <https://www.who.int/teams/noncommunicable-diseases/sensory-functions-disability-and-rehabilitation/guide-for-rehabilitation-workforce-evaluation>



## DOCUMENTO DI POSIZIONAMENTO RICONOSCIMENTO E VALORIZZAZIONE DEL RUOLO DEL TERAPISTA OCCUPAZIONALE NEI PERCORSI RIABILITATIVI – EVIDENZE NORMATIVE, SCIENTIFICHE E INTERNAZIONALI



## PARTE XI - IDENTITÀ DEL PROFESSIONISTA

## Art. 49 Definizione

Il Terapista occupazionale è il professionista sanitario, iscritto all'albo o all'elenco speciale ad esaurimento presso l'Ordine territorialmente competente, che svolge l'attività di pubblico interesse descritta nel profilo professionale e nell'ordinamento didattico del corso di laurea.

Il Terapista occupazionale svolge la propria attività professionale quale esperto nell'ambito delle occupazioni, ovvero delle attività significative che ogni persona deve o desidera svolgere ovvero che gli altri si aspettano che svolga. Tali occupazionali sono suddivise in categorie, attività di vita quotidiana, attività strumentali di vita quotidiana, attività avanzate, cura di sé, riposo e sonno, educazione, lavoro, gioco, tempo libero e partecipazione sociale.

Il Terapista occupazionale deve considerare le opportunità di inclusione sociale e le risorse necessarie alla persona per partecipare alle occupazioni di soddisfazione individuale, di salute e dei bisogni della società.

## Art. 50 Ambiti

Il Terapista occupazionale svolge la propria attività negli ambiti di prevenzione, cura e riabilitazione, in contesto pubblico e privato, nell'area clinica, formativa, di ricerca e manageriale.

Il Terapista occupazionale opera nei servizi e nei contesti entro i quali le occupazioni delle persone si attuano, sia inerenti all'ambito sanitario sia agli ambiti sociali o produttivi quali luoghi di vita, di giustizia e istruzione, associazioni, strutture, centri e servizi socio-sanitarie, socio-assistenziali.

**L'ORGANIZZAZIONE MONDIALE DELLA SANITÀ DESCRIVE LA RIABILITAZIONE E IL SUO RUOLO NELL'ASSISTENZA SANITARIA COME: ...AFFRONTARE L'IMPATTO DI UNA CONDIZIONE DI SALUTE SULLA VITA QUOTIDIANA DI UNA PERSONA OTTIMIZZANDONE IL FUNZIONAMENTO E RIDUCENDO LA SUA ESPERIENZA DI DISABILITÀ.**

**LA RIABILITAZIONE AMPLIA L'ATTENZIONE ALLA SALUTE OLTRE LA PREVENZIONE E LA CURA, PER GARANTIRE CHE LE PERSONE CON PROBLEMI DI SALUTE POSSANO RIMANERE IL PIÙ INDIPENDENTI POSSIBILE E PARTECIPARE ALL'ISTRUZIONE, AL LAVORO E A RUOLI DI VITA SIGNIFICATIVI.**

**CHIUNQUE PUÒ AVER BISOGNO DI RIABILITAZIONE A UN CERTO PUNTO DELLA PROPRIA VITA, INDIPENDENTEMENTE DAL FATTO CHE ABBA SUBITO UN INFORTUNIO, UNA MALATTIA, UN DISTURBO O PERCHÉ IL PROPRIO FUNZIONAMENTO È DIMINUITO CON L'ETÀ.**



CONNECTION



EMPOWERMENT



INFLUENCE



INSPIRATION





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**I TERAPISTI OCCUPAZIONALI,  
TUTTI I RIABILITATORI,  
HANNO POTERE E RESPONSABILITÀ.  
USIAMOLI.**

**LA PARTECIPAZIONE NON SI  
CONCEDE, SI RICONOSCE. OGNI  
INTERVENTO CHE PROMUOVE  
AUTONOMIA, VOCE E RUOLO SOCIALE È  
UN ATTO POLITICO OLTRE CHE  
TERAPEUTICO.**

**GRAZIE E BENVENUT\*!**

