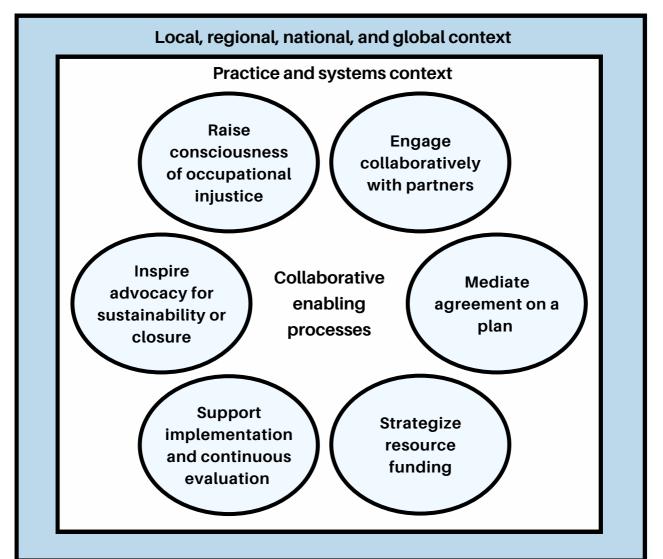
The Participatory Occupational Justice Framework (POJF) is a conceptual tool for doing justice. It can guide practice processes with professionals and the public with social inclusion in occupations regardless of individual characteristics as the targeted outcome. Occupational therapists who use the POJF engage in critical occupational therapy practice by challenging and reflecting on discrepancies between everyday occupational therapy practices and occupational therapy philosophy and theories. The POJF guides practice processes by promoting justice using an enabling approach that prioritizes occupation. The figure below shows the six nonlinear processes of the POJF. Each of the six processes occurs within two sets of contexts: the immediate practice and systems context and the larger scoped local, regional, national, and global context (Whiteford & Townsend, 2011).



This page is part of a period education guide, a collection of resources designed to support menstruation. See the rest of the guide here: Period Education Guide

Description of the process	Application to capstone and resource development
Raise consciousness of occupational injustices: Raise awareness among the public and professionals by directly naming occupational injustices and describing how these injustices threaten social inclusion in everyday life	 Explored occupational therapy literature and research on menstrual hygiene management (MHM) practices for youth with disabilities with an emphasis on data that included people with lived experiences of disability and menstruation Completed a needs assessment to identify what resources or processes providers are currently using to address MHM Expanded on the needs assessment by meeting with and actively listening to people with lived experiences of disability and menstruation. Used these narratives combined with literature that included the perspectives of people with lived experiences of menstruation and disability to name and describe the occupational justices that occur for people who experience disability and menstruation. This process highlighted a need to protect and defend the rights for choice, control, and autonomy around occupational engagement for youth with I/DD that menstruate. All meetings with stakeholders outside of occupational therapy included an explain menstrual hygiene management as an occupation, as well as the threats to healthy engagement in MHM for youth with I/DD.

Description of the process	Application to capstone and resource development
Engage collaboratively with partners: Promote collaborative enablement by forming and negotiating on a partnership with mutually agreed upon terms	 The population of central concern was identified early in the development process. The guide is intended to be usable by youth, caregivers, and professional support people. However, the primary recipients of the information will be youth. As such, the guide was informed by literature that included the perspectives of youth with I/DD as well as the Guidelines for Supporting the Sexual Health of Young People Experiencing Intellectual/Developmental Disabilities. Prescriptive practices were avoided throughout. Stakeholders were encouraged to share feedback, values, desires, and interests throughout the process. Plans for the guide were reviewed and modified based on this information. Although a prescriptive practice was avoided, the guide was ultimately developed to improve occupational justice for folks who menstruate with I/DD. This was agreed upon with partners. Partners were provided with information about potential opportunities and limitations related to the capstone process. Some limitations include time constraints and limited funding opportunities.

Description of the process	Application to capstone and resource development
Mediate agreement on a plan: Initiate an agreement based on common expectations regarding the goals, objectives, and outcomes that will be targeted	 Stakeholders were consulted in all stages of development. Goals and objectives were informed by all stakeholders. However, there was no formal documentation of the agreement. Pre-existing menstrual hygiene management resources and practice trends were evaluated to identify targeted outcomes as well as the current barriers to and opportunities for improvement. There were significant efforts spent in assessing and identifying the audience and location that would have the greatest collective impact. Gaps were identified in all systems that were assessed and as such, the guide was designed to meet the learning and accessibility needs of diverse audiences. The Guidelines for Supporting the Sexual Health of Young People Experiencing Intellectual/Developmental Disabilities was used as a framework for development. The SHEIDD Resource Review Guidance Sheet was used to self-evaluate the guide. Finally, surveys were sent to all stakeholders to evaluate outcomes.

Description of the process	Application to capstone and resource development
Strategize resource funding: Explore, identify, and pursue sources for funding and sustainability	 Funding was a barrier to the development of this guide. The guide was ultimately created without financial resources to improve the accessibility of the materials. However future iterations of a period education guide are encouraged to pursue funding that will support physical items to supplement the learning materials in the guide. This will be beneficial for all learners. An estimated price breakdown was created to assist with the pursuit of financial support. An EPIC SmartPhrase was developed to raise awareness of period education resources. This development was shared in a newsletter. A maintenance plan was developed for the sustainability of the period education guide. There will be a yearly review of the guide to ensure that the material (links and content) are accurate and up to date. Editing permissions were granted for future modifications. Time in the clinical setting was identified as as the most significant barrier for all stages of development. Time restrictions were a challenge for meeting with stakeholders. Additionally, providers reported that they have little time to discuss menstrual hygiene management during clinical appointments. As such, providers are limited by time constraints when accessing and implementing novel resources or intervention tools. The role that occupational therapy can play in supporting menstrual hygiene management was identified and described.

The table below describes how each of the six interconnected POJF processes guided enabling collaborative planning, implementation, continuous evaluation, and decision-making for this capstone.

Description of the process	Application to capstone and resource development	
Support implementation and continuous evaluation of the plan: Engage in critical reflexivity within the fluid and continuous implementation and evaluation processes. Revise the plan as needed.	 Revisions were made to the guide based on stakeholder feedback and concerns during the development process. Additionally, the period education guide is fluid as it is encouraged to be modified and adapted to best meet the needs of the person using the tool. All stakeholders, including the population of central concern, were consulted in all stages of development. A survey was created to gather quantitative and qualitative data about the effectiveness of the guide in enabling occupational justice for the population. 	
Inspire advocacy for sustainability or closure: Facilitate a collaborative decision making process regarding future uses of the services or program	 The guide was electronically shared with stakeholders. Some stakeholders met in virtual meetings to share their feedback and decisions about using the guide. Stakeholders who were not able to meet virtually were encouraged to participate in an anonymous survey. Strategies for using the guide were identified and described. Additionally, stakeholders were surveyed to identify their perceptions of the benefits or uses of the guide. Occupational therapy's role in addressing menstrual hygiene management in clinical practice was described and identified to inspire a collective effort of the profession to pursue occupational justice for people who experience menstruation and I/DD. 	

Reference

Whiteford, G., & Townsend, E. (2011). Participatory occupational justice framework (POJF 2010): Enabling occupational participation and inclusion. In F. Kronenberg, N. Pollard & D. Sakellariou (Eds.), Occupational therapy without borders: Towards an ecology of occupation-based practices (pp. 65-84). Elsevier.

Appendix B: Estimated Price Breakdown

Product or Material	Price
Disposable Menstrual Pad <u>Always Ultra Thin Feminine Pads with</u> <u>Wings, 126 count</u>	\$18.45
Menstrual Cup <u>DivaCup Model 1 Menstrual Cup, 1</u> <u>count</u>	\$33.11
Menstrual Tampon <u>Tampax Pearl Unscented Regular</u> <u>Tampons, 50 count</u>	\$10.47
Menstrual Underwear <u>THINX Hiphugger Period Underwear, 2</u> <u>count</u>	\$62.99
Reusable Menstrual Disc <u>Flex Reusable Menstrual Disc, 1 count</u>	\$33.22
Reusable Menstrual Pad <u>Leekalos Reusable Bamboo Menstrual</u> <u>Cloth Pads, 6 count</u>	\$13.99
Total Price	\$172.23

Note: These prices were obtained from Amazon in the summer of 2023 and are subject to change due to currency fluctuations or the site of purchase. Additionally, some of the items listed below reflect bulk quantities. While it may be helpful to keep several items in your kit while presenting them, consider donating extra supplies to other groups teaching about menstruation or to public restrooms in spaces like libraries, parks, or schools.

Appendix C: Author Biography

About the Author: Noelle Vidak, an occupational therapy student at Pacific University, developed this manual in partial completion of her doctoral experience and doctoral capstone project. Noelle is passionate about addressing barriers to engagement in occupations to improve health and quality of



life for all, but she is particularly enthusiastic about serving pediatric clients and their families. The topic of this capstone was inspired by social justice and inclusion for seemingly mundane occupations, like menstrual hygiene management, for those who experience intellectual and developmental disabilities. Noelle is enthusiastic about carrying these themes into clinical practice upon completion of her occupational therapy degree.

