

**Title**

Exploring emerging occupational therapy identity and the development of graduate attributes among occupational therapy students

**Short Running Title**

Emerging occupational therapy identity

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## Abstract

**Introduction:** Strong professional identity allows for appropriate representation and promotion of occupational therapy. Academic education assists in the development of occupational therapy identity. ~~This study aims of this study was~~ to explore the development of occupational therapy identity and graduate attributes in occupational therapy students after the first year of a revised curriculum.

**Method:** Occupational therapy students (n=58) were surveyed at the commencement of second year. Data analysis used descriptive statistics and inferential statistics ( $\chi^2$  for trend).

**Results:** Fifty-four students (93.1%) completed the survey. Students progressively developed occupational therapy identity over time. There were no significant associations between main factors influencing original decision to study occupational therapy and when occupational therapy identity developed. However, there were significant associations between main factors that influenced students' decision to continue studying occupational therapy (but not the main factors that influenced decision to study) and when occupational therapy identity developed. Most students agreed the curriculum equipped them to develop graduate attributes, although this was not significantly associated with factors that either influenced students to study or continue studying occupational therapy. ~~There was no significant association between the main factors that influenced students to study or continue studying occupational therapy and graduate attributes.~~ There was significant association between development of graduate attributes and occupational therapy identity ~~graduate attributes and development of occupational therapy identity~~ over time.

**Conclusion:** This study showed an emergence of occupational therapy identity and graduate attributes in students demonstrating the importance of ~~the~~ first year curriculum in the development of these factors.

*Key Words:* professional identity; occupational therapy students; first year student; regional university; curriculum

## **Introduction**

A strong professional identity which allows for the appropriate representation and promotion of occupational therapy is seen as essential for the survival and growth of the profession (Edwards and Dirette 2010, Turpin 2012). -A professional identity is one that is developed from professional values, beliefs and expert knowledge (Whitcombe 2013). Effective practice demands practitioners adopt and act on the ethos and paradigms of the profession (Hooper 2008, Peloquin 2005).

Professional identity develops over time and while academic training fosters this development, students may have a relatively strong sense of professional identity upon commencing their programme of study (Adams et al 2006, Turpin et al 2012). This perception is in part based on the general public's view of the profession (Turpin et al 2012). This perception is important as Adams et al (2006) found that among first year allied health students in the UK, students with knowledge of their chosen profession were more likely to identify with the professional group.

Within a competitive and changing health care environment, occupational therapists are at risk of not receiving appropriate recognition and remuneration because of a poorly defined identity (Wilding and Whiteford 2008). Role conflict and poor occupational therapy identity has been linked to chronic stress and burnout in occupational therapists (Edwards and Dirette 2010).

Occupational therapy is a diverse profession with clinicians practicing in a wide range of areas. Regardless of area of practice, the occupational therapy profession has been encouraged to return to its foundational theoretical and philosophical paradigms which clearly identify the unique role of occupation in contributing to the health and well-being of patients and clients (Waghorn et al 2009, Whiteford et al 2000).

Challenges in transferring this knowledge of occupational foundations to practice contexts exist within the current health care environment. The philosophical basis of occupational therapy means that occupational therapists are concerned with the ‘normality of everyday...common to everyone ....taken for granted and therefore not highly valued’ (Clouston and Whitcombe 2008, p317 ). Having an occupation-based approach puts the profession somewhat at odds with the philosophy of health based on a biomedical model (Ikiugu and Rosso 2003). This creates a conflict between the occupational therapists’ sense of self and the expectation of the workplace, perceptions of other health professionals and the community (Clouder 2003, Davis 2008). A strong professional identity is therefore essential for graduating therapists to ensure they can practice effectively in such contexts.

The foundations for development of an occupational therapy identity can be laid within undergraduate curriculum (Ikiugu and Rosso 2003). Due to the importance of academic education in developing a resilient occupational therapy identity, there has been a strong call for the main emphasis of occupational therapy education to be on occupation-based practice. Wilding and Wilcock (2001) called for the embedding of curricula in the occupational foundations of the profession as a way to strengthen, integrate and unify the profession’s knowledge base.

The role of education in the construction of identity has been highlighted in the literature on communities of practice. Wenger (1998, 2000) suggests that identity is constructed through active participation in social communities. While identity formation is a lifelong process, education has the potential to be transformative, allowing for the emergence of ‘meaningful forms of membership’ and identity development (Wenger 1998, p269). The challenge of education is to balance teaching of knowledge with participation in practice and the creation of meaning for the student (Wenger 1998). Current research into learning at university level emphasises the need to engage students in ‘deep’ learning (Ramsden 2003).

Deep learning occurs when students engage meaningfully and appropriately with a learning activity, putting it to work often in the context of problem solving, reflection and professional application (Biggs and Tang 2007).

In 2009, the occupational therapy discipline at a regional Australian University undertook a process of curriculum review and reform, with a focus on embedding occupational foundations in core occupational therapy subjects. Using an action learning approach, the academic staff established a learning community from which a revised curriculum framework and set of desired graduate attributes were articulated. The establishment of a learning community allowed consultation with occupational therapy practitioners to assist in bridging the gap between theory and practice. The graduate attributes were not generic attributes – ‘the skills, knowledge, and abilities of university graduates, beyond disciplinary content knowledge’ (Barrie 2007, p440). Rather, these were statements that described the desired attributes of students graduating from the occupational therapy programme of this university (Hooper 2008). These graduate attributes reflected the regional location of the university ([e.g. for example](#) students will develop skills to work across locations in the tropics, including rural and remote communities); the centrality of occupation within the revised curriculum ([e.g. for example](#) students will have a core understanding of occupation and its impact on health and wellbeing for individuals, communities and populations ); and the social justice perspective of the revised curriculum ([e.g. for example](#) students will contribute to the development of an inclusive society through enabling occupation; students will demonstrate a desire to address health inequities in indigenous communities ). These desired graduate attributes were seen as central to the revised curriculum framework and became the basis of alignment of teaching and learning activities and assessment tasks (Biggs and Tang 2007). The new occupation-based curriculum

commenced in 2012 with first year core subjects focused on understanding occupation as the core construct and focus of occupational therapy.

The first cohort of the revised curriculum was surveyed at the commencement of their second year. While the survey covered a range of questions relating to first year experience, [this article focuses on two](#) questions related to occupational therapy identity and graduate attributes ~~and these are the focus of this article~~.

The aims of this study were to explore the development of occupational therapy identity and desired graduate attributes in occupational therapy students having completed the first year of their undergraduate programme [in a revised curriculum at a regional Australian university in which the authors work](#). Of particular interest was how factors influencing students' enrolment and continuation in the occupational therapy programme were associated with developing occupational therapy identity and acquisition of desired graduate attributes. The relationship between emerging occupational therapy identity and graduate attribute acquisition was also investigated.

## Method

### Procedure and Participants

Fifty-eight occupational therapy students at a regional [Australian](#) university ~~in Northern Australia~~ were surveyed at the beginning of their second year of the programme in February 2013. Surveys were distributed in class to students in the second year, first semester core occupational therapy subject. The pre-requisite for enrolment in this subject is successful completion of all first year subjects in the occupational therapy programme. The study was approved by the James Cook University Human Research Ethics Committee (approval number H4781). Study participation consent was implied by survey completion.

## Instrument

The survey was designed by [a reference group of academic staff \(including the authors\)](#) from the university occupational therapy department. [Several revisions of the survey were undertaken within this group to assist in the refinement of the survey.](#) The survey contained eight questions to collect information on students' personal factors, experiences of the first year of the programme (results published elsewhere) and the development of occupational therapy identity and graduate attributes.

[Of the eight questions on the full survey, this article reports on five questions to enable exploration of identity and graduate attributes \(see Appendix A\). The first question explored](#) ~~Personal factors explored were~~ (age, gender, home town postcode, enrolment year and type and previous tertiary education). ~~Two questions explored the development of occupational therapy identity and graduate attributes. Students were asked~~ [The second and third questions required students to select from a list the main factors influencing their decision to study and continue studying occupational therapy.](#) ~~The fourth question required students~~ to rate their level of agreement/disagreement on a four-point likert scale on statements referring to the development of their occupational therapy identity ~~since at enrolment to commencement of the programme and~~ commencement of second year. The ~~second fifth~~ question required students to rate their perceptions of how the first year of the programme equipped them to meet the desired graduate attributes of the occupational therapy programme. [No other questions from the full survey were utilised as they were not relevant to exploring the development of occupational therapy identity and graduate attributes.](#)

~~Other survey questions relating to the main influence in students' decision to study and continue studying the programme were utilised to further explore the development of occupational therapy identity and graduate attributes. Students selected the main influence from a list.~~



## Data analysis

Data were analysed using the Statistical Package for Social Sciences (SPSS) (version 20; SPSS Inc., Chicago, IL, USA). Descriptive statistics were calculated and percentages used to explore variables. Inferential statistics ( $\chi^2$  for trend) were also used to explore the factors that are associated with developing student graduate attributes and developing their emerging occupational therapy identity. Home town postcodes were converted into remoteness area categories (major cities, inner regional, outer regional, remote and very remote) using The Remoteness Areas from the Australian Statistical Geography Standard (ASGS) (Australian Bureau of Statistics 2011).

## Results/findings

Fifty-four of the fifty-eight (93.1%) second year occupational therapy students completed the survey.

### Occupational therapy graduate attributes

Students were asked to rate if the curriculum equipped them to develop their graduate attributes using a four-point likert scale (see Figure 1). The overall trend suggests that students mostly rated that they agreed that the curriculum equips them to develop graduate attributes, followed by strongly agrees. [The overall trend also suggests that](#) ~~o~~only a few students rated disagree or strongly disagree.

When examining if personal factors (i.e., age, gender, regionality, type of enrolment, and prior engagement in tertiary studies) were associated with the development of graduate attributes, there was a significant association between age category and the graduate attribute: working across locations within the tropics ( $\chi^2$  for trend = 5.49,  $df = 1$ ;  $p = 0.019$ ). Upon closer inspection it was evident that students in the younger age category (<20 years) mostly

agreed/strongly agreed that the curriculum developed this graduate attribute, whereas students in the older age categories (20-30 years and > 30 years) disagreed.

There was also a significant association between age category and the graduate attribute: competence in interdisciplinary learning and practice ( $\chi^2$  for trend = 4.24,  $df = 1$ ;  $p = 0.039$ ). When examining this finding closer it appears that students in the younger age category (<20 years) mostly agreed/strongly agreed that the curriculum developed this graduate attribute, whereas students in the older age categories (20-30 years and > 30 years) disagreed.

Similarly there was a significant association between previous tertiary studies and the graduate attribute: competence in interdisciplinary learning and practice ( $\chi^2$  for trend = 3.84,  $df = 1$ ;  $p = 0.050$ ). Students without prior tertiary studies mostly agreed/strongly agreed that the curriculum developed this graduate attribute, whereas a higher proportion of students who had undertaken previous tertiary studies disagreed that the curriculum developed this graduate attribute.

Students were asked what the main factors were that influenced their decision to study occupational therapy, as well as the factors that influenced them to continue studying occupational therapy.  $\chi^2$  for trend analyses revealed there were no significant associations between the main factors that influenced students to study occupational therapy and any of the graduate attributes. Furthermore, there were no significant associations between the main factors that influenced students' decision to continue studying occupational therapy and graduate attributes.

### **Development of an emerging occupational therapy identity**

Students were asked to rate *when* they developed an occupational therapy identity using a four-point likert scale. Figure 2 provides a summary of their responses. The overall trend suggested that students progressively developed their occupational therapy identity over time.

There were no significant associations between developing an occupational therapy identity and student personal factors (i.e., age, gender, regionality, type of enrolment, and prior engagement in tertiary studies). Similarly  $\chi^2$  for trend analysis revealed that there were no associations between *when* students developed an occupational therapy identity and the main factors that influenced them to study occupational therapy. However there were significant associations between the main factors that influenced students' decision to *continue* studying occupational therapy and developing an occupational therapy identity at the commencement of their programme ( $\chi^2$  for trend = 9.77,  $df = 1$ ;  $p = 0.002$ ), as well as at the start of second year ( $\chi^2$  for trend = 4.54,  $df = 1$ ;  $p = 0.033$ ).

### **Graduate attributes and developing an occupational therapy identity**

There were significant associations between all graduate attributes and having an occupational therapy identity at both the commencement of the programme, as well as at the start of second year (see Table 1). The overall trend suggested stronger associations between developing graduate attributes and developing an occupational therapy identity at the end of the second year, compared with developing an occupational therapy identity at the commencement of the programme for most graduate attributes but not all. The exceptions were: 1) working across locations in the tropics; 2) having a core understanding of occupation and its impact on health and wellbeing; and 3) having a desire to address health inequities in indigenous communities.

### **Discussion and implications**

This study was undertaken with the first cohort of students in a revised occupational therapy curriculum. [The curriculum review occurred as part of a university wide curriculum refresh and in response to the trend towards a more occupation-focused paradigm within the profession.](#) The aim of this study was to explore the development of occupational therapy identity and graduate attributes in occupational therapy students [in a revised curriculum at a](#)

[regional Australian university in which the authors work](#). As anticipated, students' development of an occupational therapy identity increased over time. This was encouraging to see as it suggests the revised curriculum is enabling students to develop an occupational therapy identity. It also suggests an alignment between the desired graduate attributes and the teaching and learning activities within the curriculum.

The finding that at commencement of the programme the majority of students agreed or strongly agreed that they had a strong identity of becoming an occupational therapist is consistent with Adams et al (2006) who reported a strong professional identity of health students (including occupational therapy students) on entry into a programme. Wanting to become an occupational therapist (and therefore subsequent enrolment and commencement of the programme) may be associated with already having begun developing an occupational therapy identity. For example, students may have started developing perceptions of occupational therapy via career educational material ([e.g. for example](#) programme description provided by the admission centre through which applications are submitted; programme information on the university website) (Turpin et al 2012).

The clear alignment between emerging occupational therapy identity and self-reported attainment of all graduate attributes was also encouraging. ~~as it~~[This](#) suggests the content embedded within the revised curriculum assists in the development of an occupational therapy identity and that the identity being established correlates with the attributes expected of graduate therapists. ~~Given the difficulties that m~~[M](#)any occupational therapists report [difficulties](#) in making sense of their practice in a biomedically oriented health care system ([Davis 2006, Ikiugu and Rosso 2003](#)).~~;~~ [Therefore](#), ensuring a robust and relevant occupational therapy identity is established within the education programme is of considerable value to the profession (~~Davis 2006, Ikiugu and Rosso 2003~~).

Furthermore, as noted within the study findings, the strength in association between self-reported attainment of most graduate attributes and development of an occupational therapy identity increased over time. This overall change in association over time clearly demonstrates there is an increased association of development of graduate attributes and occupational therapy identity. This would suggest that students' ongoing involvement in the academic programme supports a continued shift towards an occupational therapy identity that is aligned with desirable graduate attributes.

There were a few exceptions to the increase in association strength overtime between graduate attributes and occupational therapy identity. Most notably, there was a decrease in association of the graduate attribute "core understanding of occupation and its impact on health and wellbeing" from commencement of the occupational programme to the start of second year (although both associations were still significant). A possible explanation for this may be a belief by students that they have a good understanding of occupational therapy (and occupation) at commencement of their programme with a greater self-awareness of the limits to their knowledge developing as they progress through their first year of study. This explanation would be consistent with the findings of Turpin et al (2012) who found that undergraduate students entering occupational therapy study had an understanding of occupational therapy consistent with that of the general public whereas graduate entry students had a more robust awareness of advanced occupational therapy concepts. A second potential explanation is that students may perceive the first year, first semester core occupational therapy subject as more clearly focused on occupation than the first year, second semester core occupational therapy subject. This would warrant further qualitative exploration with students, [via a focus group or individual interviews](#), in order to better understand [in depth](#) the reasons for this trend.

Establishment of an occupational therapy identity is associated with factors influencing students' decision to continue studying occupational therapy. On close inspection, students' learning as well as placement experience appears to be the main factors influencing this association. This finding points to the value of a curriculum emphasising the early establishment of a sense of occupational therapy identity to promote student retention and supports that of Tinto (2006/2007) who noted the importance of the first year in influencing students' decision to continue or leave university. Further research into this relationship is warranted through longitudinal follow up with students to examine whether this trend continues as students' progress through the programme.

The significant, inverse associations between 1) the older age category (>20 years) and the graduate attributes of working across locations within the tropics and competence in interdisciplinary learning and practice; and 2) students with prior tertiary studies and the graduate attribute of competence in interdisciplinary learning and practice, are worth further consideration. This could be a result of older students and/or those with previous tertiary study experience feeling they had developed these skills via other means prior to entering the occupational therapy programme. Regardless, it is indicative of the potential need to adjust some elements of the curriculum to better draw on and build on the previous knowledge and experience of students who are older and/or have completed previous tertiary studies. Doing so would be in keeping with the key principles of adult learning (Knowles 1980) on which this curriculum was founded and would most likely improve the learning experience for all students.

### **Limitations**

This study did not include students who were not enrolled in the second year occupational therapy subject in which the survey was distributed in. Students who weren't enrolled in this subject were likely to have not met the prerequisites of this subject

(completion of all first year subjects) and thus may have experienced a different development of occupational therapy identity and graduate attributes which was not captured in this study. These students were provided with the opportunity to participate in the study but there was no response to this recruitment attempt.

Cross sectional surveys do not allow the researchers to delve deeply into underlying phenomenon (in this case occupational therapy identity and graduate attributes). This was not the intention in this study, however, future qualitative research to explore the way in which curriculum shapes occupational therapy identity and graduate attributes is recommended.

Due to the sample size, the findings from this study are limited to this cohort of students and cannot be generalised to other cohorts within this university or to cohorts in other universities. As such, no comparisons were made to students in the previous (old) curriculum or to students in other universities. However, this article does provide discussion on the development of occupational therapy identity and graduate attributes in occupational therapy students which can be used as the basis for further research.

### **Conclusion**

This study found a growth in the emergence of occupational therapy identity among a cohort of students undertaking a revised, occupationally focused curriculum in a regional Australian University. This occupational therapy identity was found to be more closely aligned with desired graduate attributes at commencement of the second year of study than on entry to the programme demonstrating the success of the first year of the programme. An association between the early development of occupational therapy identity and students' decisions to continue studying was also identified reinforcing the importance of identity in supporting student retention. Longitudinal follow up with students is warranted to examine the continued development of occupational therapy identity and graduate attributes over the duration of the programme and into their practice as qualified occupational therapists.

### **Key findings**

- Occupational therapy identity is aligned with graduate attributes
- An association exists between the main factors that influence students' decision to continue studying occupational therapy and developing an occupational therapy identity

### **What the study has added**

This research demonstrates the importance of the first year curriculum of an occupational therapy programme in the development of occupational therapy identity and graduate attributes in students.



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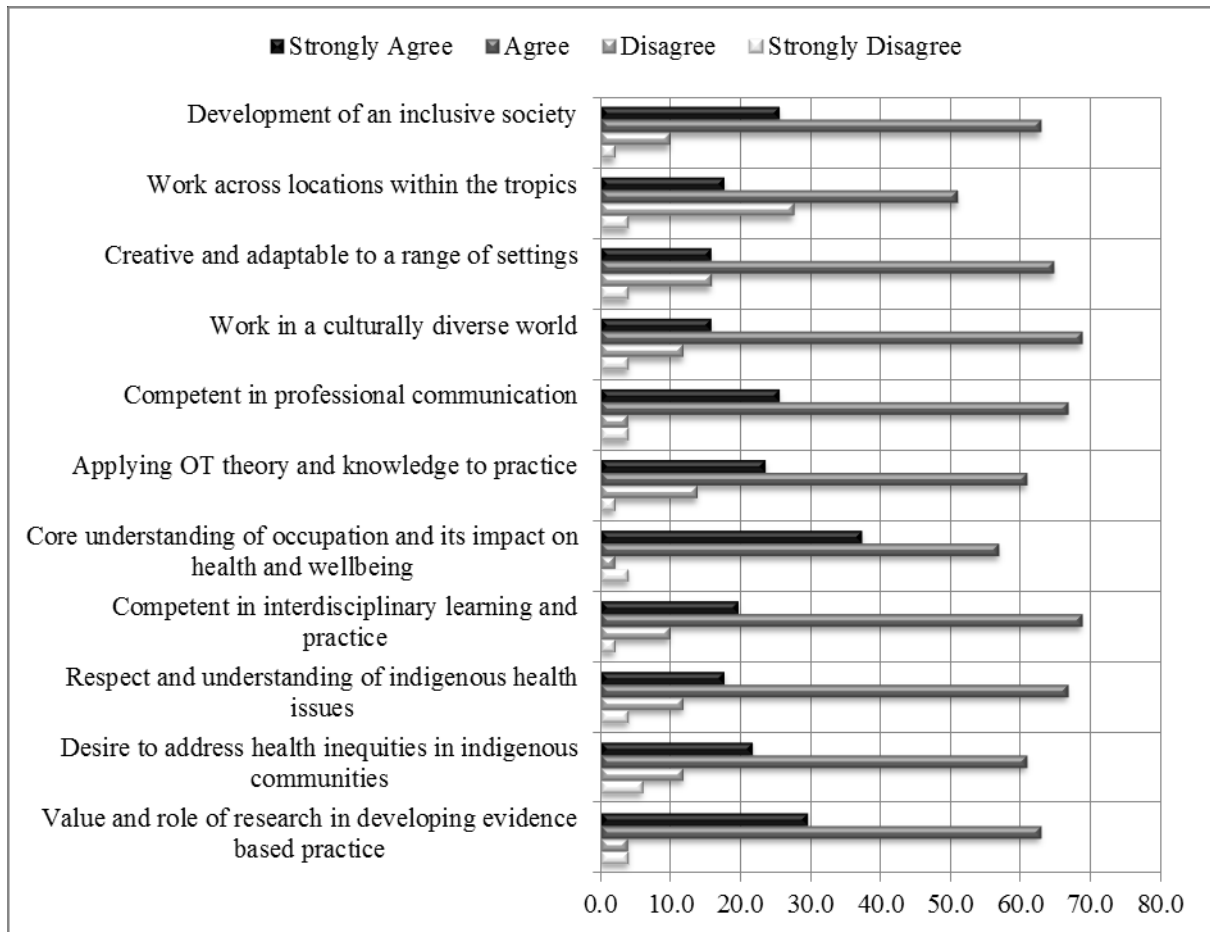
**Table 1**

Associations between when students develop an occupational therapy identity and graduate attributes

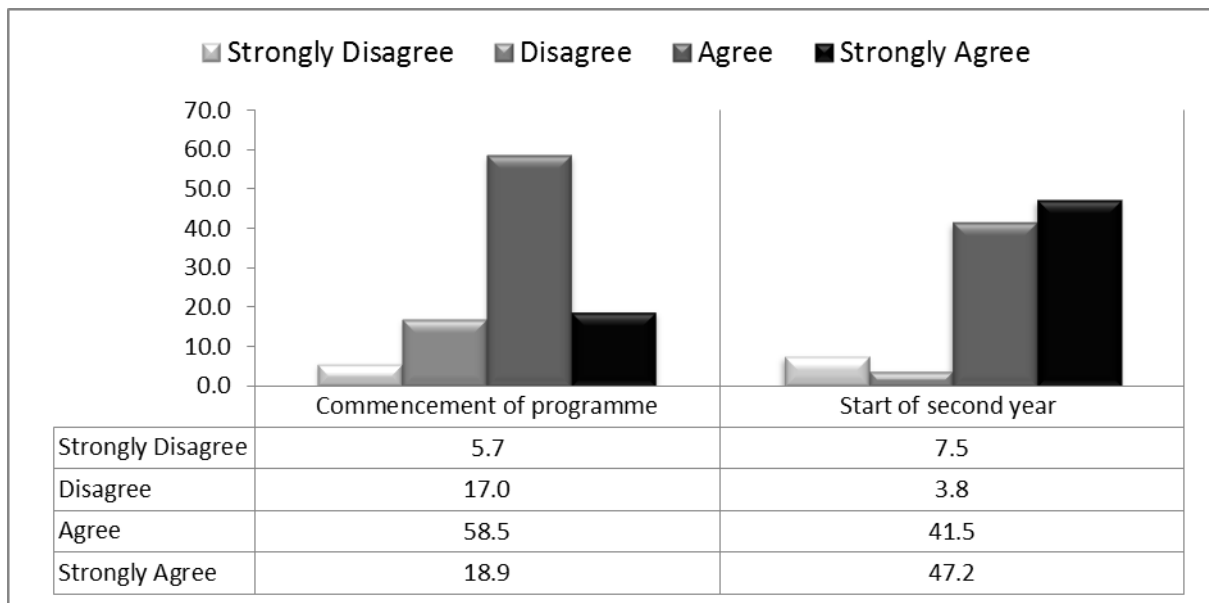
Graduate attributes	Commencement of OT programme		Start of second year	
	$\chi^2$ for trend	<i>p</i>	$\chi^2$ for trend	<i>p</i>
Development of an inclusive society	10.73	0.001**	11.08	0.001**
Work across locations within the tropics	15.45	<0.001***	12.03	0.001**
Creative and adaptable to a range of settings	14.65	<0.001***	21.97	<0.001***
Work in a culturally diverse world	15.33	<0.001***	18.79	<0.001***
Competent in professional communication	13.24	<0.001***	15.37	<0.001***
Applying OT theory and knowledge to practice	10.74	0.001**	15.04	<0.001***
Core understanding of occupation and its impact on health and wellbeing	14.82	<0.001***	13.13	<0.001***
Competent in interdisciplinary learning and practice	4.59	0.032*	7.99	0.005**
Respect and understanding of indigenous health issues	5.65	0.017*	12.77	<0.001***
Desire to address health inequities in indigenous communities	8.03	0.005**	6.44	0.011*
Value and role of research in developing evidence based practice	10.58	0.001**	15.81	<0.001***

Note. *df* = 1; \**p* < 0.05; \*\**p* < 0.01; \*\*\**p* < 0.001

**Figure 1.** Curriculum equipping students to develop graduate attributes



**Figure 2.** Stage during which students develop a sense of occupational therapy identity



## Appendix A – Survey Questions

### **1. Demographic Information**

#### **Personal Information**

Age: \_\_\_\_\_

Gender (*please tick*): Male Female

Home Town Post Code: \_\_\_\_\_

#### **Course in which you are enrolled (*please tick*)**

- Bachelor of Occupational Therapy (on campus student)
- Bachelor of Occupational Therapy (for graduates)
- Bachelor of Occupational Therapy (post graduate – conversion)
- Bachelor of Occupational Therapy (flexible delivery)
- Bachelor of Occupational Therapy (IHCAP)

#### **Year of enrolment (*please tick*)**

- 2012
- 2011
- Other (*please specify*) \_\_\_\_\_

#### **Type of enrolment (*please tick*)**

- Full time
- Part time
- Other (*please specify*) \_\_\_\_\_

#### **Previous Tertiary Education Experience (*please tick*)**

- Commenced Diploma or Certificate at another institution but did not complete
- Completed Diploma or Certificate qualification at another institution
- Commenced an undergraduate degree at another university but did not complete
- Completed undergraduate degree at another university
- Commenced another undergraduate degree at JCU but did not complete
- Completed previous undergraduate degree at JCU
- Completed Diploma of Health Sciences
- No previous tertiary education experience

**2. What was the main influence in your decision to study the Bachelor of Occupational Therapy**  
(please tick only ONE)

- I have wanted to be an occupational therapist for a long time
- An occupational therapist I know personally influenced my career choice
- An occupational therapist has treated myself or someone I know
- Someone provided me with career advice
- I was not accepted into my preferred career option
- I did not know what else to do
- Other (please specify) \_\_\_\_\_

**3. What influenced your decision to continue in the Bachelor of Occupational Therapy** (please tick all that apply)

1.  I have enjoyed the teaching and learning experiences in the degree
2.  I have made close friends with other students
3.  I feel supported by the staff
4.  I enjoyed the campus experience and being at JCU
5.  I was inspired by the mid-year occupational therapy placement
6.  I was inspired by the second semester community organisation placement
7.  The expectation of other people (parents, siblings, spouse, friends. etc)
8.  I would leave but I do not know what else to do
9.  Other (please specify) \_\_\_\_\_

Please write the number (from above) of the MAIN factor that influenced your decision to continue in the Bachelor of Occupational Therapy \_\_\_\_\_

**4. Becoming an Occupational Therapist**

The following statements relate to your identity of becoming an occupational therapist

Please rate your level of agreement/disagreement with the following statements where:

1= Strongly disagree

2= Disagree

3= Agree

4= Strongly agree

	1	2	3	4
At commencement of the Bachelor of Occupational Therapy program I had a strong identity of becoming an occupational therapist				
After First Semester 2012 I had a strong identity of becoming an occupational therapist				
After Second Semester 2012 I had a strong identity of becoming an occupational therapist				
Now, at the start of 2 <sup>nd</sup> year, 1 <sup>st</sup> semester 2013, I have a strong identity of becoming an occupational therapist				



### 5. Occupational Therapy Graduate Identity

The following statements relate to the stated goal of the JCU Occupational Therapy program and the graduate attributes.

Please rate your level of agreement/disagreement with the following statements where:

1= Strongly disagree

2= Disagree

3= Agree

4= Strongly agree

The first year curriculum has equipped me to:	1	2	3	4
Contribute to the development of an inclusive society through enabling occupation				
Develop the skills to work across locations within the tropics including rural & remote communities				
Be creative and adaptable to a range of settings within global contexts				
Work in a culturally diverse world				
Be competent in professional communication and behaviour				
Be confident and competent in applying OT theory and knowledge to practice and implementation to individuals, communities & populations				
Have a core understanding of occupation and its impact on health and wellbeing for individuals, communities and populations				
Be competent in interdisciplinary learning and practice				
Demonstrate respect and understanding of indigenous health issues – rural & remote, communities, cultures, lifespan, locations				
Demonstrate a desire to address health inequities in indigenous communities				
Be appreciative of the value and role of research in developing evidence based practice as basis of professional development				