

VIEWPOINT

Centralizing occupation in occupational therapy curricula: Imperative of the new millennium

GAIL ELIZABETH WHITEFORD School of Community Health, Charles Sturt University, Albury, NSW, Australia

ANN ALLART WILCOCK School of Occupational Therapy, University of South Australia, Adelaide, SA, Australia

A new millennium provides an ideal opportunity to consider the future in the light of the past. The beginnings of the profession of occupational therapy were characterized by powerful voices articulating a message about the need to use occupation as a therapeutic tool in treating people with poor health and handicap. Rapid acceptance and growth of that idea occurred at a time when women enthusiastically engaged in paid employment, which allowed them to express humanitarian principles previously restricted to the domestic sphere. Courses were developed to build on existing knowledge and skills, focusing either on the medical dimensions of treatment or, for those already trained in medical know-how, skills in appropriate occupations. For many years there was little change to the underlying characteristics of such prototypic curricula. However, as time elapsed, each specialty in the profession demanded more and more content to support it, leading ultimately to a diminution of occupation-based subjects as others grew apace with scientific inquiry.

For our profession, the final decade of the last century was characterized by the historic renaissance of occupation in occupational therapy (Whiteford et al., 2000). Research that has focused on understanding the complex and multifaceted phenomenon of humans as occupational beings has contributed to a revitalized knowledge base that informs practice globally. The consolidation of occupationally focused practice models and approaches such as enabling occupation (CAOT, 1997) have, arguably, influenced how occupational therapists conceptualize and deliver services. In the light of these developments it is timely to consider to what extent occupational therapy curricula reflect these changes and are truly the hallmark of 'a self-defining profession' (Yerxa, 1998). However, ensuring that occupation is centralized in our curricula is more than

an appropriate response to research and practice developments. It is even more than just a good idea. Rather, it is an imperative in the new millennium to ensure that our increasingly self-defining profession not only survives but flourishes. It is overdue, for, as Pierce (1999: 3) suggests, 'the time to strengthen occupation in our curricula was yesteryear'.

One of the most important outcomes of embedding our curricula firmly in occupational foundations is an epistemic one: that our knowledge base will be strengthened through greater internal consistency and unification. To date, the constitution of the occupational therapy knowledge base has been problematic because of its reliance on (to varying extents) conceptual frameworks borrowed from biomedical, biological and social sciences (Wilcock, 1998; Yerxa, 1998). The reason that the 'borrowed' nature of our knowledge base has been problematic is twofold. First, the concepts and constructs borrowed from other sciences and disciplines are neither philosophically nor ontologically aligned. What constitutes a view of reality in the social sciences is very different from the view of the basic sciences. Similarly, beliefs about people as social agents are markedly different between psychology and biomedicine, for example. The net effect of such tensions has been confusion about what exactly constitutes the proper knowledge base of occupational therapy and why.

The second problem associated with borrowed knowledge is that unless it is clearly framed as 'means-to-ends-knowledge' that serves to contribute to our understanding of humans as occupational beings, it tends to become 'reified'. That is, in the minds of students who have no clear notion of why they are learning anatomy, physiology or neuroscience and how these subjects contribute to the occupational therapy profession's particular view of humans, such subjects can become ends in themselves. This is particularly compounded when such subjects, often service courses in universities, are delivered without an appropriate orientation as to why, and to what extent, occupational therapists need to understand the material covered. When this is the case, it is not surprising that students of occupational therapy struggle to integrate such knowledge into an understanding of occupation and applied occupational therapy concepts.

Problems with knowledge integration and reification of related science subjects can be viewed as an impediment to occupationally focused therapy, contributing, in turn, to the rise of specialist practice areas in which some practitioners have even removed 'occupation' from their titles. Such developments have led to an erosion of the perceived legitimate domain of concern of our profession, which has to be about the relationship between health and occupation. Clearly, this is a situation that needs urgent attention in the light of the discovery of the value of occupation by other professions.

To reclaim occupation in occupational therapy, then, it is time to sort the epistemic cupboard. This means throwing out the 'odd socks' and keeping only those that fit well so that there is room to spare for new material as part of an

integrated, unified knowledge base presented in well-articulated curricula. Such a knowledge base will be characterized by its degree of alignment with the philosophical premises of occupational therapy. It will also include conceptual material from other disciplines and sciences that has been critically assessed for its potential to inform understanding of humans as occupational beings. In such a scenario, curricula are organized around conceptual streams of knowledge supporting the occupational philosophy; neuroscience, for example, could be taught not as a stand-alone subject, but included in the conceptual stream 'occupational development and performance'.

In terms of curriculum philosophy, occupational therapy educators need to consider developing not only an occupational perspective within subjects, but also an occupational philosophy that overarches the education of occupational therapists. An occupational approach to teaching and learning involves developing a different kind of academic culture influenced by, and compatible with, the theory that humans are occupational beings. Such a philosophy must surely result in occupational therapy graduates having a clearer understanding of the distinctive beliefs the profession holds about occupation and health, and how these inform practice. They would also show greater strengths in applying these beliefs to their daily practice, so making clear to others what they have to offer.

An important outcome of epistemological reorganization and the subsequent construction of occupational therapy curricula grounded in occupation will be clarification of the research agenda. Occupational phenomena located in a coherent and systematized knowledge base will become the focus of inquiry rather than the by-product. For too long, what were essentially occupational phenomena were studied under the auspices of other disciplines and subsequently lost to our collective knowledge base. However, in a scenario where occupation serves as both foundation and superstructure in curricula (and in which the foundational science is occupational science), graduates will be conceptually prepared to enquire into occupation from a range of different perspectives and with a range of methodological strategies. As more and more occupationally focused research occurs, expanding our collective understandings of occupational phenomena, the more the knowledge base will expand and hence be reinforced through further research. Dissemination of research findings about the interface between occupation and humans has the ability to influence the contexts in which occupation is embedded in society: from the micro level of social service delivery through to the macro levels of funding and social policy construction. It is an exciting possibility, especially when the global challenges of the new millennium can be framed as predominantly occupational issues – for example, unemployment, underemployment and early retirement.

Another outcome of centralizing occupation in our curricula and organizing our knowledge base accordingly is that of language and professional communication. As Townsend (1998) points out, use of our own language to define and describe occupational phenomena provides the vehicle for claiming professional

authority and enacting leadership. The starting place would surely be in the naming and framing of subjects. If we begin to use the words and concepts of occupation in our subject and programme nomenclature, our reports, our business plans and our correspondence, we turn these into opportunities to educate and inform others about our profession-specific purpose and direction. Our past professional history is replete with examples of the use of the terminology and language of other sciences and disciplines. Clearly, this use of adopted or 'reduced' language failed to communicate to others (especially funders of health and educational services) our distinctive focus. The consistent and confident use of occupationally framed language by students, graduates, practitioners, managers, and researchers has the potential to dramatically alter perceptions of the relevancy of occupational therapy knowledge and skills. Essentially, through considered and consistent use of language, our ability to make a societal contribution becomes increasingly self-evident.

If the outcomes of redeveloping occupational therapy curricula to ensure the centrality (as opposed to 'lip-service') of occupation include knowledge consolidation, the achievement of significant research outcomes, increased recognition and ability to contribute to all levels of society, then what are we waiting for? Historically, since the strength of ideas apparent at our genesis subsided, the profession has been influenced by a range of powerful external forces with respect to how occupational therapy practice has been defined, with, in some areas, a net negative result. By comparison, it could be argued that in occupational therapy educational contexts, greater freedom in self-definition and determination has existed to date. Within the realities of structural and fiscal constraints, programmes have mostly been able to chart their curricula without undue external interference. Therefore, as occupational therapy educators may be seen as largely responsible for the form, philosophies and content of our current curricula, they are also responsible for re-creating them. Patently, the time to enact such responsibility is now.

Because of contextual constraints, however, full curriculum redevelopment is going to be neither possible nor appropriate in every situation at any given point in time. Contextual barriers notwithstanding, there are other strategies that can still contribute to strengthening occupation and an occupational perspective in curricula. To this end, Pierce (1999) suggests highlighting occupation in theory, in teaching learning activities and, for example, using occupationally focused narratives in a range of topic areas. At the most basic level, it is about 'talking occupation' (as opposed to activity) with students and stimulating them to interact with occupation both conceptually and practically.

The occupational therapy curriculum of the future is dynamic. It exists as a coherent, structurally sound and philosophically grounded entity. It serves to inspire and guide its learners as well as provide a fertile ground for unprecedented professional growth. It is worthy of serious consideration by other professions and disciplines and, ultimately, symbolizes our growing maturation and authority. It is, finally, the hallmark of a self-defining profession.

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Address correspondence to Gail Whiteford, Associate Professor, Occupational Therapy, School of Community Health, Charles Sturt University, Albury, NSW, Australia 2640.
Email: gwhiteford@CSU.edu.au