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Title: 'It sowed a seed': exploring the professional experiences of occupational therapists who started working in Ireland in the 1970s'

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Background: There have been increasing calls from occupational therapy associations and scholars around the world to engage in historical research in order to better understand, promote and advance the profession (Trentham 2011; Molke 2009). The history of nursing, medicine and other health professions is well documented, both in Ireland and abroad; however there is no official record of the history of occupational therapy in Ireland. As AOTI prepares to celebrate its 50th birthday in 2014 and the profession moves towards registration it is hoped this research will contribute to greater awareness of the experiences and contributions of occupational therapists in Ireland.

Objectives: This study aims to explore and record the professional experiences of occupational therapists in Ireland; contribute to the University of Limerick's archive on the history of occupational therapy in Ireland; and also add to the growing body of international literature on the history of the profession.

Methods: A qualitative oral history methodology was employed involving seven in-depth, semi-structured interviews with occupational therapists who began working in Ireland in the 1970s. The results were subject to thematic analysis.

Results: Results highlight the experiences and contributions of occupational therapists who graduated in the 1970s, particularly through opening departments and pioneering services. Themes include developing services; the problem of professional recognition; and professional and personal development.

Conclusions: This research records the challenges and rewards associated with working as an occupational therapist in Ireland. It is hoped that these findings will contribute to greater understanding of the development of our professional identity.

Introduction

Health professions around the world are making increasing efforts to explore, record and promote their histories (Trentham 2011; Canadian Nurses Association 2007). They are motivated by the understanding that the writing of history 'is a powerful process that helps define and redefine the nature of whatever is written about' (Molke 2009). It also contributes to professional identity, encourages critical reflection on the value of a profession's contribution to society and provides individuals, communities and societies with an element of longitudinal meaning over time which far outlives the human life-span (Canadian Nurses Association 2007; Black and MacRaild 2000). The occupational therapy profession is no exception in encouraging the active investigation of its historical roots and experiences; however what is exceptional is the absence of any record of the history of occupational therapy in Ireland. This study aims to fill the gap in the knowledge about the development of the profession in Ireland by asking 'what were the professional experiences of occupational therapists who started working in Ireland in the 1970s?' Focusing on therapists who started working in the 1970s allows investigation into the experiences of pioneer therapists, the foundations of the profession in Ireland and key developments up to the present day. Additionally, the absence of written documentation and published records on the history of the profession in Ireland make this study's oral history methodology highly significant and valuable in capturing our history, appreciating and learning from our past and shaping our identity and visions for the future.

Study aims:

To explore and record the professional experiences of occupational therapists who started working in Ireland in the 1970s.

To identify the key challenges and benefits of their experiences.

To contribute to the University of Limerick archive on the history of occupational therapy in Ireland and to international efforts to preserve and promote the history of the profession.

Literature Review

Most health professions have made great efforts to preserve and promote their history insisting that it has the potential to contribute to the development of professional identity, self-understanding, critical reflection, group cohesiveness and pride (Canadian Nurses Association 2007). Indeed the history of nursing, medicine and other health professions is

extremely well documented, both in Ireland and abroad (Oakley 2005; O' Brien 1984; Scanlan 1991; Fealy 2005; D'Antonio 2010; Porter 1996.) Further Canada, Australia, the UK and America boast their own associations for the history of nursing and medicine while in Ireland University College Dublin hosts centres for the history of nursing, midwifery and medicine (UCD 2012). Unfortunately, there is no official historical collection for occupational therapy in Ireland. The University of Limerick's ongoing efforts to compile an electronic archive on the history of occupational therapy in Ireland aims to alleviate this gap and promote the contributions of occupational therapists in Ireland.

In recent years there has been a growing body of international literature on the history of occupational therapy (Duncan 2011; Roberts et al 2008; Stein and Cutler 2002; Wilcock 2001; McKay 2008) and there have been increasing calls from occupational therapy associations and scholars around the world to engage in historical research in order to better promote, understand and advance the profession (Trentham 2011; Molke 2009; Baptiste 2011). Perhaps this is a reflection of recent emphasis on developing a cohesive professional identity after a period of professional identity crisis and uncertainty. Indeed Ann Wilcock, who studied the history of occupational therapy extensively, describes investigating history as a search for stability in a 'rudderless ship without an anchor in an uncharted sea' (Wilcock 2001). She insists that the 'discovery of a rich and surprisingly stable history of great antiquity may help provide the courage to leave port, and supply a rudder and an anchor for the exciting journey ahead' (Wilcock 2001). Others such as Schwarz and Colman (1988) and Molke (2009) have highlighted how the study of history can help contemporary practitioners to better interpret their profession's original ethos and intentions which then aids current actions and thinking.

Interestingly, Barry Trentham's (2011) analysis of historical research in occupational therapy indicated a growing interest in occupational therapy history among therapists in Canada. Feedback suggested that in addition to being engaged by historical story-telling 'occupational therapists are drawn by a desire to better understand their profession and its place in history, to be inspired to learn from the achievements and struggles of others, to celebrate accomplishments, and to gain perspective on current professional dilemmas' (Trentham 2011). The University of Limerick's archive aims to ignite similar excitement and insight among occupational therapy professionals in Ireland. Further, by situating practitioners' experiences within historical, political, economic and cultural infrastructures (Ferriter 2005); by building on the small collection of previous material, such as interviews with pioneer occupational therapists Anne Beckett (Butler and Ryan 2004) and Anna King (Boland and Boyle 1997) and Mary-Ellen Flynn's MSc thesis on the positive experiences of contemporary male occupational therapists in Ireland (Flynn 2010); and by anticipating the

Association of Occupational Therapists in Ireland's (AOTI) 50th anniversary celebrations in 2014 it is hoped that this historical research will demonstrate 'avenues of understanding to the historically situated social dynamics that interact to shape our profession' (Trentham 2011) and 'sting the profession and discipline into a new and more demanding formulation of purpose in the present' (Molke 2009).

Methodology

This project adopted a qualitative, oral history methodology. Qualitative research is 'a form of social inquiry that focuses on the way people interpret and make sense of their experiences and the world in which they live' (Holloway 1997) and considering that the purpose of this study is to understand the unique professional experiences, views and insights of occupational therapists who worked in Ireland it is fitting that a qualitative approach was employed. Meanwhile, an oral history methodology was chosen because it records historical insights and experiences and these recordings may then be used to trigger, enliven and contrast practice (Ryan and McKay 1999). In particular, interpretive oral history explores the meaning and significance of gathered information and allows the findings to be synthesised in a meaningful way (DeBalsio et al 2009). The accounts are highly significant, especially considering the absence of other historical sources, in order to achieve the principle goal of understanding, preserving and promoting the development of the occupational therapy profession in Ireland.

Method

The chosen research method was semi-structured interviews which gathered information about Irish occupational therapists' professional experiences, opinions and insights (Pontin 2000; Mason 2002). This method provided a framework with which to structure and compare interviews, ensuring that key issues were addressed, while also allowing for new and unique issues to be discussed with each participant (Porter 2000; Hammell et al 2000). Interviews lasted between thirty and ninety minutes, were framed in clear and open language (Hammell et al 2000) and guides were developed based on both the researcher's own areas of interest in the development of occupational therapy in Ireland as well as issues that arose from the literature review. Examples of questions that were asked included: 'Why did you decide to become an occupational therapist? What are the key professional developments that you have witnessed or experienced? How would you rate your satisfaction with your working life? What are your hopes for the future of the profession? What advice would you give future

occupational therapists?' Interviews were piloted on an independent party and then conducted at a time and place most suitable for participants.

Data collection and analysis

Participants were recruited via convenience sampling and snowballing. The first participant was recruited through the professional network of the principal investigator, who supervised the research project, while all further interviewees were recruited by asking participants to recommend friends and colleagues who would be interested in taking part. Interviews were then conducted at a time and place convenient for participants and recorded with a digital recorder. Field notes were also used to record data, impressions and thoughts about the interview process and outcomes (Pontin 2000). The interviews were then transcribed verbatim and analysed, coded, and synthesised using data analysis software, NVivo. A process of thematic analysis was then used, which is a method for identifying, analysing and reporting patterns (themes) in data by searching across a data set to identify repeated patterns of meaning (Braun and Clark 2006). The process involved becoming familiar with the data, generating initial codes, searching for themes, reviewing themes, defining themes and producing results (Braun and Clark 2006). Findings were then connected back to the original literature and illustrative quotes were indexed and used to emphasise points from core categories and to demonstrate how meaning was expressed in the respondents' own words rather than those of the researcher, thereby enhancing credibility (Greenhalgh 2006; Hammell et al 2000). Indeed, addressing credibility, transferability, dependability and confirmability are essential strategies for ensuring authenticity and trustworthiness in qualitative research projects and this was ensured throughout the project (Hammell et al 2000; Letts et al 2007). For example, credibility was further enhanced by debriefing regularly with the project supervisor to ensure faithful interpretation and recording of results; transferability was ensured by making connections to existing literature to highlight similarities and contrasts; dependability was addressed by recording analytical decisions in field notes and reflective journals while confirmability was assured by donating the raw data, such as the audio recordings and transcripts, to the University of Limerick archive on the history of occupational therapy in Ireland.

Ethical considerations

This research study is minimal risk but ethical approval was obtained from the University of Limerick's EHS Ethics Committee. Information sheets and consent forms were provided to all participants prior to participation in the research and they were informed that they were free to withdraw from the project at any stage. The researcher also aimed to maintain confidentiality by assigning pseudonyms to participants; however, due to the recruitment

method of convenience sampling and snowballing and the small number of occupational therapists who began working in Ireland during this period participants were also informed that it may be possible to identify them in the results. The dissemination of the research in public journals, professional conferences and the permanent, secure electronic archive at the University of Limerick was clearly explained to all participants and the researcher sought to appropriately represent all participants (Elliott 2005; Hammell et al 2000). In addition, participants were made aware that the researcher aimed to situate any information gathered within the larger framework of the development of occupational therapy in Ireland and different infrastructures which may have influenced this development, further demonstrating credibility and reflexivity (Guba and Lincoln 2005; Greenhalgh 2006).

Findings

Participants

Seven occupational therapists agreed to participate in the study. They were all Irish female graduates of St. Joseph's college of occupational therapy, Dun Laoghaire and had worked in a wide variety of services including community care, psychiatric hospitals, paediatric services, community mental health teams, regional hospitals, and intellectual disability services. They also held a range of positions and responsibilities including senior therapist, chief executive, occupational therapy manager and local health manager. Four participants are retired while three are still working and they live in four different regions in Ireland. During the analysis of the interview data three themes emerged: developing services; the problem of professional recognition; and professional and personal development. To illustrate the themes, direct quotes made by the participants are included. Pseudonyms are used to help maintain confidentiality.

Developing services

One of the most prominent findings from the study was participants' descriptions of the challenges they faced at the beginning of their professional experiences. In most instances participants entered positions where they were the first and only occupational therapist in a service. They were then expected to establish services from scratch with no support, mentoring, training, structure, or guidance, limited resources, large caseloads and very poor understanding among fellow staff and health boards about what they were trying to do. Although some therapists sought support from other professionals or peers working nearby many cited this period as the most challenging of their career.

'There was no sort of set programmes that this is what needs to be done, it was very much just get on and do it which looking back I mean it was ridiculous for somebody straight out of college with no experience to go to a place where no one had a clue what you were going to do.' (Frances)

'I don't believe that at that stage the health board had any conception of what occupational therapists actually did, which gave you great freedom but at the same time really left you out there very isolated and it was quite intimidating.' (Myra)

'She apparently announced to them "oh don't worry if you see this strange girl arriving with a hammer and a measuring tape, she's just the new OT". So I don't know what they thought I was going to do, I didn't know myself what I was going to do.' (Frances)

'I was putting on a good face, pretending that I was well able or whatever but in fact that only lasted a couple of weeks because I went to a job in a smaller unit.' (Mary Jo)

'In some ways I feel wasn't it a pity I didn't get the early mentoring and training... because in a way I look back with regret at a lot of wasted years, but I did the best I could but I could have done much more.' (Rose Marie)

The problem of professional recognition

Many participants cited professional recognition as another key challenge that they experienced. Most talked about the initial lack of understanding and recognition for the profession, with one participant claiming the profession was previously considered 'the poor relation' of the health disciplines. Participants also recalled the constant need to explain their role, justify what they were doing, fight their case, develop a vision and have it valued. Two therapists stated that they felt that professional recognition was still the biggest challenge they faced in their careers; however, most agreed that the situation has improved significantly, though slowly, and there is now a greater understanding and respect for occupational therapy within the health services and society in general.

'I suppose I would think that occupational therapy is still considered a new profession, you still have to fight all the time to get OTs jobs, working. We're up against it all the time, against larger professions.' (Kathleen)

'They don't think we're necessary. Nurses and doctors are necessary but we're not.'
(Kathleen)

'You do have to fight early on, you really had to fight your corner and let people know what you did and why you did it and you know trying to make a case for more staff and it was all challenging.' (Mary Jo)

'I think the earlier years were much more challenging and I think the satisfaction level became greater in my latter years' work as an OT when I could see the recognition was coming within society in general.' (Noirin)

Professional and personal development

All participants reported satisfaction with their careers. Although they identified different areas for improvement within the profession many highlighted ways in which their professional experiences had provided them with a sense of appreciation for health and well-being, and a sense of perspective, contentment and balance in their personal lives. Some said their experiences had affected their own personal development, including increased confidence and the development of friendships, while others listed professional achievements, including career progression, leadership opportunities, training, and work-life balance as benefits of their careers. Most talked about the people focus of the profession, the satisfaction they gained from meeting and helping people and the importance of keeping the client at the heart of their professional experiences.

'When you see what people are going through... I just felt so lucky that I had three kids who didn't have any disabilities. God I checked them out from top to toe for months making sure their reflexes were working properly. Ya it would give you a huge appreciation of just health and well-being.' (Frances)

'I think it's a wonderful profession. I think the opportunity to help people make changes in their lives is huge.' (Myra)

'I enjoyed having a career, I don't think I'd enjoy being at home and the fact that I trained as an occupational therapist, that I got to use it all over the years.' (Kathleen)

'There's a lot of people who are suicidal who you can see the impact of not looking after their own personal lives so it would have really helped with my own personal development.'
(Kathleen)

'I suppose the main thing really was the satisfaction in seeing people improve or benefit from whatever service you were giving them or the effect that you had on your clients, for sure that would have been the main. That's why you did it really.' (Mary Jo)

Discussion

This study is one of the few to explore the professional experiences of pioneer occupational therapists in Ireland and it has illustrated some of the key challenges and rewards that accompanied these careers. For many participants, the most challenging experience was initiating and developing services with little support or general understanding of their role. Interestingly, however, many participants also cited this period as one of their most fulfilling, discussing their satisfaction at overcoming these obstacles, starting services and seeing them develop and flourish. Indeed the increase in services and the number of therapists employed was identified as the biggest development in the profession in Ireland and the participants and their peers played a key role in sowing the seeds for this achievement. Indeed current practice offers a range of supports, learning opportunities, evidence and continuing professional development for students, new graduates and experienced therapists alike (HCPC 2012; Lee and Mackenzie 2003). It is difficult now to imagine the reality of starting services without such support but it is important that we are aware of these beginnings to measure the developments undertaken and the contributions made. It is also imperative that the occupational therapy profession in Ireland develops and maintains effective strategies for supporting students to transition to the role of occupational therapist, reducing professional isolation and ensuring appropriate support for all new graduates (Lee and Mackenzie 2003).

Professional recognition was also identified as a key struggle for participants. This reflects international literature which illustrates how the profession has historically felt misunderstood and underappreciated by both colleagues and the public (Turner 2011; Clark 2012; Jacobs 2012; Wilding 2011; Hashem Salman Abu Tariah et al 2011; Moore et al 2006). This situation poses challenges for the profession but it also means that clients' occupational needs risk going unmet (Wilding 2011). In response to these concerns Florence Clark (2012) called on therapists to embrace evidence with attitude to create a cohesive picture of high-powered scientifically credible occupational therapy while also recognizing the transformational power in their own selves and in the work they perform every single day. Similarly there has been an increase in calls for therapists to take responsibility for promoting and marketing occupational therapy (Jacobs 2012; Baum 2006) while Wilding (2011) has encouraged therapists to question the dominance of medical discourses upon their practice which may have contributed to a hegemony that practice must be medicalised rather than occupation focused. In addition, Turner (2011) has described occupational therapy as a profession in adolescence, searching for its identity and vision for the future, but on the cusp of maturing into young adulthood. This transition period is reflected by the fact that the majority of participants in this study felt that recognition for the profession had

developed hugely and occupational therapy is well positioned in Ireland today, with increased confidence and great future potential. Interestingly, the two participants who cited professional recognition as their biggest ongoing challenge both worked in psychiatric services. Although both participants reported overall satisfaction with their careers, it is noteworthy that literature has indicated diminishing morale and higher levels of emotional exhaustion among occupational therapists working in mental health settings than those working in non-mental health settings (Lloyd and King 2004; Sturgess and Poulsen 1983; Bailey 1990).

Some participants offered explanations for the gradual increase in professional recognition in Ireland ranging from increased educational efforts, continuous professional successes, ongoing promotion of the value of the profession and the development of a more scientific background and language. Many participants also discussed their anticipation of statutory registration and their hopes that this would further advance professional recognition in Ireland. In addition it is worth noting that many of the participants went on to fulfil different leadership and management positions in their careers thereby answering calls for directly and indirectly promoting professional recognition in different areas, whether through piloting services, introducing new ways of thinking, engaging in political activism to address different issues, contributing to the organisation of the Association of Occupational Therapists in Ireland, offering clinical expertise on national forums, demonstrating competent leadership skills and instilling confidence and esteem in staff and the profession. The findings highlight the importance of promoting and championing the value of occupational therapy, both as a professional association and also as clinicians in our daily interactions with clients and colleagues.

Finally, it is significant that despite the challenges of developing services, achieving professional recognition, experiencing economic downturns, and being consistently short staffed all of the participants reported satisfaction with their careers. This is consistent with international literature which shows high levels of job satisfaction in occupational therapy (Eklund and Hallberg 2000; Hellickson et al 2000; Moore et al 2006). In particular, many participants discussed the importance of the humanistic nature of the profession, and the focus on the relationship between the therapist and client. Therapists valued the opportunity to work with and help people and to make a difference in peoples' lives. This characteristic has also been rated highly in similar studies (Hashem Salman Abu Tariah et al 2011; Hellickson et al 2000; Moore et al 2006). Furthermore, participants were grateful for opportunities for professional and personal development. Positive social environments and peer support were identified as benefits of their careers (Hashem Salman Abu Tariah et al 2011) while additional benefits included increased confidence, learning, productivity, training,

responsibilities, contentment, career progression, international experience, work variety, leadership positions, work-life balance, and an appreciation for health and well-being. These findings celebrate the high rates of job satisfaction among therapists in Ireland and highlight the importance of encouraging and promoting ongoing professional and personal development; however, it also illuminates concerns such as staffing levels and appreciation for the profession which, if left unaddressed, may decrease future levels of job satisfaction and work productivity.

Implications for occupational therapy

This study aims to fill the gap in the knowledge about the development of occupational therapy in Ireland by exploring and recording the professional experiences of therapists who graduated and worked from the 1970s. It also aims to contribute to the growing body of international literature on the history of the profession (Duncan 2011; Roberts, Kurfuerst and Low 2008; Stein and Cutler 2002; Wilcock 2001; McKay 2008) and to respond to calls from occupational therapy associations and scholars around the world to engage in historical research in order to better promote, understand and advance the profession (Trentham 2011; Molke 2009; Baptiste 2011). Further, studies have highlighted how historical research and understanding can help guide contemporary practitioners in maintaining their profession's original ethos (Schwarz and Colman 1988; Molke 2009). By presenting participants' views on the key developments in the profession in Ireland, the realities of practice, hopes for the future, the importance of person-centred practice, and the satisfaction and success such principles provide this study offers invaluable insights, inspiration and advice for contemporary and future occupational therapists which may help to improve job satisfaction, advance wider professional experiences and signpost areas of strengths and difficulties within the profession in Ireland. As Turner (2011) urges, we need to accept our strengths and weaknesses and learn from the ups and downs of our journey so we can venture forth towards professional maturity.

At the same time this study poses some challenges, highlighting areas for development in the profession and therapists' concern over insufficient understanding of the value of occupational therapy, lack of control over budgets, limited resources, and insufficient staffing levels. It is also important to mention that one participant left the profession to pursue general management positions in the health service after becoming frustrated at reaching the highest level of advancement possible within occupational therapy and also after feeling that a lot of her clinical expertise was going unused in community care due to an emphasis on functional assessments and the provision of aids and appliances. She stated that she hoped the primary care strategy (DoHC 2001) will enable community positions to use more

clinical interventions and treatment programmes. Additionally, one participant entered private practice and cited a lack of appreciation from higher management in the health service as a significant factor in this decision.

Implications for practice

This study provides significant information for assisting occupational therapists and managers to be aware of current work practices and review recommendations for future development. Firstly it was found that there are a range of interventions that occupational therapists have facilitated in services throughout Ireland. Therapists were also generally satisfied with their working conditions, which is encouraging for the future of the profession as job satisfaction has been shown to affect staff retention and work productivity (Moore 2006). Furthermore, the importance that participants attached to therapeutic relationships and their sense of service to clients is very encouraging. It demonstrates the vibrance of the profession's core principles of client centred practice throughout the participants' careers and it allows young therapists to consider the relationship between client centred practice and job satisfaction. Additionally, two participants stated that they fully embraced evidence based practice and rated it highly significant to their work in demonstrating the value of occupational therapy interventions but the majority of participants said it did not affect their own work practices. All agreed, however, that students played a key role in promoting the use of evidence and models of practice and the participants felt that students were confident and capable in continuing best practice in future workplaces. Therapists also discussed the usefulness of professional interactions and urged new therapists to embrace it while peer support was also identified as a crucial support for providing assistance and relief. Going forward all managers should ensure that this is maintained. All participants agreed that they hoped the profession would continue to advance and strengthen and they also offered individual hopes and interests for advancement including progression in the prison services, representation in local authorities and in the department of health, the creation of more posts, continued and improved recognition of occupational therapy as an integral part of the multidisciplinary team and continued emphasis on clients and striving to help them reach their maximum potential

Limitations

This was a small-scale exploratory study and while it is important to examine and record the experiences of the seven participants their input is not considered representative of all occupational therapists who started working in Ireland in the 1970s. Nevertheless it is hoped that the findings will reflect general trends and inform future research on the history of the profession in Ireland. A larger study would contribute to a more comprehensive

understanding of the experiences of therapists during this period. It is also important to note that interview questions were designed by the student researcher and the information gathered was therefore influenced by the topics addressed in the interview guide. Further, the use of member checking with the participants may have enhanced reliability of the results; however the time frame did not permit this in this project. The study is also limited by the inclusion of only female therapists and it is worth noting that although all participants reported high levels of job satisfaction it is possible that therapists with negative experiences may not have responded to recruitment attempts.

Implications for further research

Overall there is a paucity of literature regarding the history of occupational therapy in Ireland. A larger study would provide a more comprehensive understanding of the professional experiences of therapists who started working in Ireland in the 1970s. Further research might also explore the educational experiences of therapists and how they were prepared for professional practice. Lastly, a comparative study of occupational therapists in other countries could help identify common themes and also illustrate experiences that were unique to Ireland.

Conclusion

This study explores the professional experiences of seven occupational therapists that started working in Ireland in the 1970s and it provides important insights into the challenges and rewards that were associated with their careers. On the one hand the research stands alone as a unique record of the experiences of Irish occupational therapists and also in its effort to fill a glaring gap in our knowledge about the profession's development; however, on the other hand it is part of a much wider and richer tradition of recording the history of health professions and occupational therapy around the world in order to solidify professional identity and celebrate positive development (Canadian Nurses Association 2007; Oakley 2005). Consequently, the study should permit comparison and transferability with other histories of occupational therapy and health professions worldwide.

Findings indicate that job satisfaction is high among Irish occupational therapists but challenges were highlighted in developing services in the early years of practice and in obtaining professional recognition. Based on these findings it is important that the profession of occupational therapy in Ireland continues to support clinicians in providing effective health care. In particular it is important that students are adequately supported in transitioning to

clinical practice; efforts are made by therapists and associations to actively promote and advance recognition for the profession among other health care professionals and the general public; and further it is necessary that job satisfaction is maintained at a high standard and that opportunities for professional and personal development are prioritised in future services. Lastly this study also aims to inspire appreciation of the achievements and accomplishments of occupational therapy in Ireland, and provoke critical discussion about future directions for providing quality care

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