MSc Occupational Therapy

OT6054 Occupational Therapy Project 4

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Abstract

Purpose: The relationship between occupational choice and context is a developing concept within the sphere of occupational science. Using an occupational justice perspective, this research explores how young people’s occupational choices are informed by the structure of the Irish children’s residential care system. In recent years, great strides have been made in legislation regarding the rights of this population. However, existing literature shows that young people with experience of residential care continue to be more at risk for poor life outcomes than the general population. This may be in part due to occupational injustices operating within the system.

Methods: Five young people aged 14-17 currently living in community-based residential care were interviewed using a semi-structured, photo-elicitation method. The qualitative data was analysed thematically through a six-stage process.

Findings: The context of the children’s residential care system both enables and restricts occupational choice. This is evident across four themes that emerged from the data: transient lifestyles, limited engagement in education, ambiguous daily routine, and reluctance to engage in co-occupations with residential staff.

Conclusion: The data suggests occupational disruption, occupational imbalance, and a culture of learned helplessness may be informing the occupational choices of young people within this context, in turn impacting social health and well-being. In line with contemporary international studies, occupational therapy practice could play a valuable role in supporting young people involved in the Irish residential care system. Due to the exploratory nature of this study, further investigation is warranted.
Introduction

Existing research in occupational science has found that decision-making during adolescence is co-constructed through both internal processes and contextual influences, including the structures within a young person’s socio-cultural environment (Gallagher et al. 2015, Galvaan 2015). Occupational justice refers to a society’s ability to recognise and provide for the occupational needs of its members in an empowering manner (Hammell 2008). This exploratory study uses an occupational justice perspective to examine the choices of adolescents within the structure of the Irish children’s residential system (CRS).

Currently, over 300 young people (YP) live in community-based residential homes across Ireland (Department of Youth and Children’s Affairs [DYCA] 2015). According to Tusla, the National Child and Family Agency (2013), YP are placed in the CRS when they cannot live with a biological or foster family. While the CRS also comprises a number of residential youth detention centres (DYCA 2015), the scope of this research does not include these facilities.

Literature Review

Little empirical data has been published from the perspectives of YP in the Irish CRS. One dated longitudinal study found this population is consistently more likely to participate in risky behaviours including substance abuse, early education leaving, and criminal involvement (Kelleher et al. 2000). More recently, an unpublished Master’s thesis describes the transitions of 20 YP from CRS to independent living as largely unstable and problematic (Kilkenny 2012).

An international scope of literature indicates adolescents involved in residential services worldwide often have similar outcomes to their Irish counterparts (Broad 2005, Cashmore and Paxman 2006, Stein 2006, Mullan et al. 2007, Cousins et al. 2010, Vis et al. 2011). In an exploratory study, Nelson et al. (2014) measured the health related quality of life of 229 adolescents in residential care in the United States. The findings propose that the well-being of this population is compromised due to limitations in their daily functioning (ibid).

In a participatory study involving 30 YP, Paul-Ward (2009) identifies occupational barriers within the United States’ foster care system. The author asserts opportunities are not available for mastering the independent living skills necessary for a healthy transition to adulthood (ibid). In a more recent publication, Paul-Ward et al. (2014) call for further investigation into occupational injustices that may be imposed by the CRS.
The current study explores the daily occupational choices of YP living in the CRS. It aims to gain a rich understanding of how this context informs YP’s choices, potentially identifying occupational barriers. Based on the data, this article proposes three strategies for increasing YP’s participation in meaningful occupations, which could impact health and well-being at an individual and population level (Wilcock 2006, Stadnyk et al. 2010).

**Methodology**

Underpinned by a critical theory paradigm (Sellar 2015), this study addressed the research aims through a qualitative approach using photo-elicitation and semi-structured interviews. An interpretive framework was employed to gain a better understanding of the lived experiences and perspectives of the participants (Lincoln and Denzin 1994).

**Sampling**

The project was granted ethical approval in June 2015 by both the University of Limerick Education and Health Science Research Ethics Committee (2014_05_10_EHS) and the Tusla Research and Development Manager. It adheres to the core ethical principles outlined in Tusla’s Research Guidelines (2015). Five community-based residential childcare centres in one region were approved by an area manager within Tusla for recruitment of participants. The managers of each centre distributed informational leaflets to a total of 15 potential participants on behalf of the researcher. Ten young people expressed interest in participating. Written guardian and YP consent was organised by the centre managers. Five individuals were excluded from the study as guardian consent forms could not be obtained. YP were reminded that participation was completely voluntary, and they could choose to end their involvement in the study at any time. See Table 1 for inclusion criteria and Table 2 for participant demographics.

### Table 1: Inclusion Criteria for Participants

- Currently 12-18 years old
- Currently Living in one of the 5 approved Residential Childcare Centres
- Written consent obtained from guardian (parent, social worker, or both, depending on legal status of care agreement) and YP
Table 2: Participant Demographics

<table>
<thead>
<tr>
<th>Pseudonym</th>
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<tr>
<td>Kaitlyn</td>
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<tr>
<td>Bella</td>
<td>17</td>
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</tr>
<tr>
<td>Alice</td>
<td>14</td>
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Data Collection

Semi-structured interviewing through photo-elicitation was conducted with each participant, lasting from 17-42 minutes each. Images used in the interviews depicted 12 typical adolescent activities, such as studying and shopping, and were selected based on previous photo-voice research carried out by one author’s PhD level work with adolescents (Gallagher et al. 2015). The photo-elicitation method incited conversation about what the participants chose to do on a daily basis while serving to diminish the power imbalance created by the obvious age gap between the interviewer and the participant (Mahon et al. 1996, Harper 2002). Participants and their guardians consented to audio recordings of the interviews. Interviews were carried out in the residential centres, under indirect staff supervision. The interviewer ensured residential staff members were available should participants wish to discuss any issues that may have unintentionally arose during or after the interview.

Trustworthiness

Regular consultation was provided by the research supervisors, and a reflexive diary was kept over the course of the project to increase the reliability of the analysis (Friesen 2008). Diary entries were made after each interview and throughout the analysis process, chronicling the principal researcher’s own perceptions and feelings toward the data. Research involving children provides a unique set of ethical implications to ensure validity of data collection (Harden et al. 2000). Efforts were made by the interviewer to address the participants as the ‘experts through experience’ in the field, deliberately creating a power-sharing environment where young participants felt comfortable to share their true perceptions (Mahon et al. 1996). Member checking was offered to participants at the time of interview, but none of the participants wished to partake. As the interviewer was employed in a residential home at the time of the study, this home was excluded from the recruitment process, therefore creating a transparent distinction between the roles of carer and researcher (Mahon et al. 1996).
Analysis

The data was analysed using Braun and Clarke’s (2006) phases of thematic analysis. Interviews were transcribed and anonymised by assigning pseudonyms and omitting geographical locations identified in the data. NVivo10 was used by the researcher to initially code the collected data through re-reading the interviews a series of times. A manual process was then used to group the codes into sub-themes, and a thematic map was then drawn up.

Findings

Through the final stage of defining and refining the existing codes four themes emerged from the analysis: Transient Lifestyles, Limited Engagement in Education, Ambiguous Daily Routine, and Reluctance to Engage in Co-occupations with Residential Staff.

Transient Lifestyles

Transient lifestyles were described by all participants as an overarching theme, and moving between multiple environments clearly influenced individuals’ occupational choices. The impermanence the YP experienced was evident through the descriptions of moving from family home to foster homes and finally to residential care.

‘I didn’t really live on a farm, but near a farm…I used to live in [other city]...I moved back to [current location], I wasn’t born in [other city].’ - Bill

‘Eh, no, when I lived with me Ma, well it wasn’t me ma, it was me foster ma. That was in [village]… then was my auntie’s before that, and before that then was the other house.’ – Bella

Participants discussed not only experiencing changing environments in a historical context but also described presently moving between their residential homes and biological family homes regularly. Four of the participants talked about going on access to their family homes most weekends, where they encountered different social environment and expectations.

‘I mostly sit in my room for the day. That’s just when I’m here. When I’m up in [hometown], I’d be out with my mates like.’ – Kaitlyn

‘Yeah, really different. Cuz when I’m here, you know, I wouldn’t socialize or anything cuz I don’t go out with anybody…When I’m here I wouldn’t really go out on me own, but when I’m home I’d be out all the time.’ Alice
Logically, the young people’s relationships with other people were also affected by the transitory lifestyles. Two participants spoke about no longer engaging in former activities, such as playing pool, based on changing friend groups.

‘I used to do it with him...what he was doing.’ – Ethan

‘I don't really hang around with them people anymore that I used to.’ - Bella

All five of the participants spoke about former leisure occupations, such as horse riding and cycling, which were discontinued because they moved to a new foster care home or to a different residential home. One participant spoke about his frustration at having to delay sitting his Junior Certificate exams due to moving schools on multiple occasions, which ultimately led to him leaving school early.

‘Like I should have had it done like two years ago, but since I moved, I missed the junior... Yeah, it was really annoying... Pretty much, just [made me] not want to do anything again.’ - Bill

The examples provided here demonstrate how changeable environments impact the choices of the YP on a daily basis.

*Limited Engagement in Education*

The second theme that emerged was limited engagement in education. The majority of participants reported not being involved in any type of formal education. YP used the words ‘boring’, ‘stupid’, and ‘hard’ in reference to their experiences in the traditional school setting, and strong negative feelings were expressed:

‘I never liked school. I made it to first year. That’s it.’ – Ethan

Participants alluded to challenging experiences in school, ranging from being reprimanded for acting as class clown to being bullied by peers. While no specific details were provided in regards to addressing these difficulties, the residential care structure was acknowledged as attempting to encourage YP’s involvement in education by offering alternatives to mainstream school, such as home-schooling.

‘We tried starting school here, and I don’t like it, so I’m getting home schooled…starting in January’ –Alice
Two participants reported engaging in state-funded vocational training. Both of these YP expressed keen interest in the activities provided in these training centres, such as woodworking and robot-building. However, a ‘take it or leave it’ attitude was also portrayed toward their continued learning, as a weekly stipend was mainly attributed to influencing their choice to remain involved in education.

‘Some of the stuff is the same as school, like, but its less people, and less rules, and you get paid.’ – Kaitlyn

‘...but sure if I don’t go to [training organisation], I don’t get paid so.’ – Ethan

Only one participant expressed interest in returning to mainstream school in the future. This plan was contingent upon her exit from residential care and returning to her family home.

‘...hopefully when I go back to [hometown] I’ll be going back to school.’ -Alice

Some participants mentioned a desire to engage in third level studies or vocations in the future, but no clear plans were in place to support these aspirations.

‘I’d probably like to be like a YAP [Youth Advocate Programmes] worker or something. Or if I don’t like that, something to do with beauty or something working with dogs.’
– Alice

‘I’m thinking about [studying fashion], but I don’t know if I’m good at it or not.’ - Kaitlyn

None of the participants spoke about consequences from the care system for not attending school, but one YP did feel his lack of attendance was ‘kind of frowned upon.’ – Bill

Ambiguous Daily Routine

A third theme of ambiguous daily routine also arose. Participants reported spending a large portion of their time engaging in unstructured activities such as ‘sleeping’ and ‘chilling’ during the day in residential care. While two of the young people kept regular weekly schedules during school term, routines of the other young people varied widely from day to day. Participants spoke about feeling able to approach residential staff to make a plan for the day but uncertainty existed around how to manage a daily routine.

‘Yeah. I’m really bad with like the whole routine thing, cuz I don’t sleep well at night, so I normally sleep during the day.’ – Alice
‘I wake up about two, make sometimes breakfast, and go out with friends, come back around 10. Yeah, that’s my whole day.’ - Bill

‘At the moment I don’t really have any hobbies. I’m not interested in anything. I don’t know what to do.’ – Kaitlyn

Engagement in instrumental activities of daily living such as preparing meals, managing finances, and housework were very rarely mentioned in the interviews. Although two participants spoke about preparing breakfast independently and occasionally helping prepare dinner, a general reliance on residential staff to complete these activities was evident.

‘I come down watch a bit of t.v., the staff cook us an Irish breakfast…’ - Ethan

Monetary incentive was used to engage one young person in housework.

‘You get pocket money, 17 euro pocket money. It goes by your age, so I’m 17 so I can get 17 euro. And then you can do a job for a tenner a week, so I can get that as well.’ - Bella

Participants often described passing time by engaging in activities which they related to boredom, such as watching television, using mobile phones, or smoking cigarettes.

‘But most of the time I keep to myself, watch a bit of telly. But I don’t really like watching telly, so I just sit in my room…’ – Kaitlyn

‘Smoke a ciggy. That’s the other way of doing it. Just come in and chillax and watch a bit of T.V. Watch a few programmes.’ - Ethan

Reluctance to Engage in Co-occupations with Staff

The final theme emerged from the YP’s perceptions of staff members. Although participants felt staff members were readily available to engage in co-occupations, the YP often did not accept offers of activities from staff. One participant even spoke about turning down activities offered as a reward for her good behaviour.

‘They ask you if you want to go out…I never go out with them. But they’d ask you if you want to do something, or go to the pictures, or something, but I don’t ever.’ - Bella
One co-occupation that participants did often engage in with staff was shopping. This was due to the fact that staff had to be present in order to avail of the young people’s monthly clothing allowance.

‘[I go] with staff, because they pay for everything.’ - Bill

‘I always go shopping with the staff. I’d always go shopping once a month anyway cuz you get a clothing allowance, so I’d go shopping once a month...You only get 50 [euro].’ - Bella

The YP in this study generally described having very limited social contact with staff and peers within the residential homes. In contrast, engaging in co-occupations with family members or friends outside of the residential care system was regularly reported.

‘Me sister fosters me little brother...we’d probable go to the park with him, or bring him do you know to the balls...And then on the Saturday night maybe we just have a night with me and her. We’d just sit in or go for a meal. Or we might go to the pictures, do stuff like that.’ - Bella

‘I’d eat and all with me little brothers and then, em, yeah, then like I’d probably sit down for an hour or so downstairs.’ - Alice.

**Discussion**

In line with previous research, this body of data supports the existence of a transactional relationship between context and occupational choice (Gallagher et al. 2015, Galvaan 2015). The findings of this exploratory study highlight how the context of the Irish CRS influences YP’s occupational choice, through the four themes of transience, limited engagement in education, ambiguous routines, and interactions with staff members. The data suggests the CRS acts as both an enabler and barrier to the occupational engagement of YP. While efforts are clearly being made to provide a variety of occupational opportunities, the CRS may be constraining YP’s access to meaningful occupations of their choice. Based on these findings, three recommendations for occupational therapy practice are provided.

**Enabling Occupation**

According to Wilcock and Townsend (2009), occupational justice involves a two-stage process, firstly achieved by meeting each individual’s basic needs. It is evident from the data that the CRS supplies the basic physiological needs of its residents, as demonstrated in Figure 1
(Maslow and Hoffman 1996). Housing is provided, meals are being cooked, and clothing is purchased for YP within the care system. In addition, an element of safety is maintained through the provision of round the clock staffing in the residential homes. Staff members offer a vast range of services ranging from transportation, to cleaning, to counseling. Because the care system provides these basic needs, YP are freed from the burden of procuring these elemental requirements themselves and thus have increased capacity to partake in meaningful, age-appropriate activities. In this way, the CRS provides occupational choices that may not have been available to YP otherwise.

**Figure 1**

**Barriers to Occupation**

The second stage of the occupational justice process involves the provision of equal opportunities to realise each individual's potential through occupational engagement (Wilcock and Townsend 2009). Likewise, legislation mandates YP in the care of the CRS should have the same opportunities as their peers who live in a traditional family setting (Department of Health and Children [DOHC] 2001). However, the findings here suggest these opportunities may not be readily accessible. YP’s occupational choices appear to be limited by the CRS through occupational disruption, occupational imbalance, and the restricted development of independent living skills. These factors are potential barriers to occupational engagement.

**Occupational Disruption**

Occupational disruption is defined by Christiansen and Townsend (2010) as a transient or temporary condition which restricts participation in meaningful occupations. In line with existing literature (Paul-Ward 2009), the data suggests the CRS exposes YP to multiple occupational disruptions due to physical relocation. This impacts the process of establishing identities as occupational beings, as YP are constantly required to adapt to changing environments. The transient nature of the CRS decreases YP’s ability to make autonomous choices in their day to day activities.
Irish Adolescent Time Use

In order to better understand the extent of the restrictions imposed by the CRS, the occupations of the wider adolescent population are considered. Two large scale, cross-sectional time use studies of adolescents in Ireland both indicate that on average, the largest portion of the day is spent attending to personal care, including sleep (Hunt 2014, Quail and Williams 2015). Following this, roughly one third of time is spent in school or study occupations, and approximately twenty percent of the day is used in leisure and free time activities (ibid). This snapshot of Irish adolescent time use is starkly different than the typical day described by participants involved in the current study.

Occupational Imbalance

Under the occupational justice framework, occupational imbalance denotes a population’s over or under productivity, which decreases access to a more enriching routine (Townsend and Wilcock 2004). The data from the current study suggests the CRS may be fostering underproductive daily routines in YP. In contrast to the time-use studies mentioned above, participants in this study describe spending a much lower portion of their time engaged in educational occupations, the primary area of productivity amongst this age group (Hunt 2014). Furthermore, the interviews in this study suggest a large portion of time is spent in unstructured activities.

Despite efforts, the CRS does not appear to consistently provide YP with the support they need to remain engaged in education. One explanation for this may be lowered expectations for academic performance among this population (Edmond 2014), which is echoed in the present study. A national report commissioned by the Ombudsman for Children Office posited that children in residential care commonly experience negative stereotyping from teachers and carers alike (Darmody et al. 2013). Likewise, in this study, the absence of consequences for avoiding school activities indicates the CRS may not be placing enough value on supporting educational engagement with this population.

Subsequently, YP not involved in formal education miss out on valuable opportunities to develop the skills crucial to successful vocational endeavors in the future (Hojer and Johansson 2013), which may lead to an occupational imbalance in productivity in adulthood. According to Viner et al. (2012), attending school is a social determinant of health for adolescents. Positive engagement in education has been linked to resilience and successful life outcomes in both
children with care experience as well as those without (Gilligan 2007, Hojer and Johansson 2013, Hunt 2014). Interestingly, in a national survey commissioned by the DCYA of over 66,000 Irish youth, access to a high standard of education was perceived by adolescents as the best part of living in Ireland (Coyne et al. 2012).

Occupation imbalance is also indicated within the CRS through the frequent mention of participants engaging in unstructured, independent sedentary activities, such as smoking and watching television. Alarmingly, an international systematic review of 232 studies has linked these types of activities to boredom and decreased mental health (Tremblay et al. 2011). Although few studies have specifically examined the barriers to co-occupations between YP and CRS staff, two small scale studies argue YP may actively attempt to distance themselves from association with staff members due to an awareness of the negative public perceptions of growing up in state-provided care (Johnson et al. 1995, Gilligan 2000). The Irish National Standards for Children’s Residential Centres require that facilities offer a range of opportunities in order to develop YP’s interests, talents, and hobbies (DOHC 2001). However, hesitancy to engage with residential staff may influence YP’s choices around partaking in social activities offered by the CRS.

**Barriers to Independent Living**

These national standards also call for provisions that instill the skills necessary to become an independent adult (DOHC 2001). In contrast, the interviews in this study contain very few references to YP participating in instrumental activities of daily living. The findings indicate the CRS may be creating a reliance on monetary reward for cleaning or attending courses, instead of nurturing YP’s internal motivation to engage in these activities. The culture of allowing YP to watch television while staff members complete household chores may be contributing to a sense of learned helplessness. Similar to Paul-Ward’s (2009) findings, the Irish CRS places these adolescents in the role of being ‘cared for’, which is counter-intuitive to developing the independent living skills necessary for transitioning to successful adulthood (Allen and Williams 2012). Moreover, this culture contributes to the high demands on residential care workers, which results in exceptional rates of staff burn-out (Cieslak et al. 2014, Salloum et al. 2015). Although it is not explicitly mentioned in this body of data, other researchers have noted a high turn-over of care workers perpetuates the transitory nature of the CRS mentioned previously in this discussion (Kilkenny 2012, Daly 2014).
Limitations

This study is limited by the small number of participants from one geographical area. The five residential houses in which recruitment took place were selected by Tusla, resulting in a non-representative sample. While efforts were made to create a power sharing relationship between the interviewer and participants, the pre-selected photos used in the interviews naturally influenced the direction of the conversations. It is also noted that this cohort is a particularly vulnerable group with experience of institutionalisation, and this factor may impact the trustworthiness of the responses provided during the interviews. Two of the interviews took place with a staff member in the room, which could have influenced the responses of the YP.

In light of these limitations, it is recommended that future research in this area should include interviews with staff and policy makers involved in the CRS and quantitative time-use studies that provide more precise indication of what occupations YP are engaging in. Nonetheless, the findings presented in this exploratory study are in line with international research from multiple disciplines, including social work, psychology, education, and social care. Based on this collective knowledge, recommendations for future developments in the CRS can be gleaned.

Implications for Practice

In recent years, multiple reports commissioned by the Irish government have called for systemic improvements that increase participation and empowerment of YP in the CRS (DYCA 2011, Child and Family Act 2013). This research asserts an understanding of how this context informs occupational choice is key in supporting this population to participate in the activities they need and want to do on a daily basis. Three recommendations for occupational therapy practice are presented: expansion of practice into the CRS, facilitation of occupationally balanced routines, and provision of educational support.

Recently, a call has arisen for occupational therapy services to be established in order to better support YP living outside biological family homes (Paul-Ward and Lambdin-Pattavina 2016). While occupational therapy is not widely used in the Irish CRS, evidence is emerging to support its role on the inter-professional team involved in child protection services (O’Malley 2014). Paul-Ward (2009) asserts a targeted, occupation-based approach is necessary to promote independent living skills within this population, including budgeting and vocational skills. Although limited empirical evidence in this practice area has been published, a recent pilot study using pre and post measurements indicated significant improvements in instrumental activities of daily living amongst thirty adolescents in the American CRS due to occupational therapy input.
(Kramper et al. 2015). By recognising and understanding the influences that the CRS has on YP’s choices, bespoke occupational therapy services could be created to break down the barriers to participation in the Irish context.

Secondly, occupational therapists should provide consultation to policy-makers and staff members in order to establish meaningful routines for YP within the CRS, in an attempt to reduce the impact of multiple transitions. Maintaining an occupationally balanced routine is fundamental to increased health and well-being (Wilcock 2006, Matuska and Christiansen 2012). Occupational therapists have provided effective interventions supporting individuals through transitions within other institutions, such as prisons and hospitals (Farnworth 2000, Kronenburg et al. 2011). Similarly, establishing routines based on shared food preparation, mealtimes, and group leisure activities can be carried out consistently across varying environments, helping YP navigate the transitions regularly faced within the CRS.

Finally, occupational therapy should use its unique scope of practice, spanning both the classroom and home environments, to support educational engagement among YP in the CRS. Occupational therapists can provide advice to caregivers and teachers alike in order to remove barriers to academic performance. Education-based interventions are regularly facilitated through occupational therapy, targeting sleep hygiene and concentration techniques (Barnes et al. 2003), organisational strategies (Bonnard and Annaby 2015), and stress management skills (Benson 2013).

**Conclusion**

The data presented here further supports the theory of a transactional relationship between context and individual choice (Gallagher et al. 2015, Galvaan 2015). This exploratory study uses an occupational justice perspective to bring attention to the influence the Irish CRS has on YP’s occupational choices. While a legislative shift in the care system has attempted to increase opportunities for YP to engage in a variety of activities, the data suggests occupational disruption and imbalance may exist within the CRS, warranting further investigation. Building upon existing knowledge from occupational science and other disciplines, this research article critically examines these barriers to participation and proposes that occupational therapy has a role to play in supporting YP in the Irish CRS.
References


