

Adaptive Techniques Utilized by Occupational Therapists

Who are Working Mothers

A THESIS

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BRENDA PRINCE, B.S.

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TEXAS WOMAN'S UNIVERSITY

DENTON, TEXAS

November 15, 1991

Date

To the Dean of Graduate Studies and Research:

I am submitting herewith a thesis written by Brenda Prince entitled "Adaptive Techniques Utilized by Occupational Therapists Who are Working Mothers". I have examined the final copy of this thesis for form and content and recommend that it be accepted in partial fulfillment of the requirements for the degree of M.A., with a major in Occupational Therapy.

Grace E. Gilkeson

Grace E. Gilkeson, Ed.D., OTR, FAOTA, Major

Professor

We have read this thesis
and recommend its acceptance:

Sally Schultz

Sally Schultz, PhD., OTR

Jean L. Judy

Jean Judy, MA, OTR

Accepted:

Leslie M. Thompson

Dean of Graduate Studies and Research

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Adaptive Techniques Utilized by Occupational Therapists Who Are Working Mothers

Brenda Prince

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Abstract

This is a pilot study assessing the use of adaptive skills acquired as occupational therapists to determine whether these skills better equip them in balancing the dual roles of mother and professional. Of the 30 surveys mailed, twenty subjects responded. Subjects were employed at least 30 hours a week as occupational therapists and were mothers of children age 12 and under. The survey consisted of 3 open - ended questions, a pie graph, and 3 subjective questions to rank 1 - 5 (least to most) regarding productivity (work), leisure - play, and self - maintenance. Therapists reported the majority of their time was spent on productivity; they cited communication and developmental knowledge attained in occupational therapy training as most important. However, personal leisure, individual self - maintenance and personal stress management were not rated highly. Recommendations for further research include comparative studies by practice area and a comparison of occupational therapists with other professionals.

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CHAPTER I

Introduction

The philosophical base of occupational therapy adopted by The American Occupational Therapy Association, Inc. (AOTA) in 1979 stated:

Man is an active being whose development is influenced by use of purposeful activity. Using their capacity for intrinsic motivation, human beings are able to influence their physical environment through purposeful activity. Human life includes a process of continuous adaptation. Adaptation is a change in function that promotes survival and self-actualization.

Biological, psychological and environmental factors may interrupt the adaptation process at any time throughout the life cycle.

Dysfunction may occur when adaptation is impaired. Purposeful activity facilitates the adaptive process. (Rogers, 1983, p. 807)

King (1978) reiterated "that the adaptive process constitutes the core of occupational therapy theory and that specific attributes of adaptation are also the significant and characteristic attributes of occupational therapy" (p. 432). The view that human function is a process of human adaptation through change in bio-psychosocial environments supports a model of adaptive functioning as being influenced by an individual's organizational status, and measured by the individual's skills, habits, roles, interests, occupational values and feelings of competence (Oakley, Kielhofner, and Barris, 1985). Black (1976) stated "a role is a position in society that

contains a set of expected responsibilities and privileges" (p. 226). One person may perform several different roles.

Working women practice adaptation in their roles of professional career women and mothers (Adams and Winston, 1980). Practicing occupational therapists who are also mothers are particularly well equipped for role adaptation through the knowledge of "occupational therapy which is unique in its utilization of the demands of the real life environment" (King, 1978, p.432).

The 1990's are a time of exploding technology which may place extreme demands on time and energy of persons in dual roles (Peters, 1987). In the interest of time and energy conservation, occupational therapists already skilled in the art of adaptive responses may generalize these skills to balance the everchanging roles of parent and professional.

Problem Statement

Do adaptive skills acquired by occupational therapists better equip them to balance the dual roles of career woman and mother?

Purpose of the Study

The purpose of this pilot study was to investigate the frequency with which occupational therapists incorporate knowledge of adaptive responses gained in occupational therapy education with fulfilling the daily life tasks of mother and professional.

Significance

Identification of adaptive skills used by occupational therapists will assist in identifying specific techniques to dual roles. These insights may contribute to increasing the already known benefits derived from occupational therapy education and practice experience.

Research Questions

Questions to be addressed in this research are:

1. To what degree do occupational therapists who are working mothers consider that they utilize occupational therapy adaptive responses acquired in time management, energy conservation, body mechanics, child development and interpersonal relationships?
2. How important is play/leisure time to occupational therapists who are working mothers?
3. Do self-maintenance skills, as taught and practiced in occupational therapy, better assist the working occupational therapy mother in establishing a balance in the work/play continuum?

Basic Assumptions

It was assumed that:

- 1) Skills acquired through education for the successful performance in the role of occupational therapy are generalized to successful performance of other roles, i.e. professional and parent.
- 2) Information about the generalization of basic therapist skills to other sectors of their lives could be identified through the use of the survey developed.

- 3) The respondents would answer the surveys with sincerity and honesty.
- 4) Occupational therapist respondents have met the licensure requirements of Texas.
- 5) The respondents have, recognize, and can identify special skills acquired as a result of their occupational therapy education.
- 6) The subjects analysis of daily time use would encompass a 24 hour day.

Limitations of the Study

The limitations of the study are:

- 1) Subjects were limited geographically to the Trinity North District of the Texas Occupational Therapy Association.
- 2) The number surveyed was small.
- 3) The instrument does not associate skills acquired and generalized from a specific theoretical frame of reference or specialty of practice.
- 4) The selection of participants was not by practice specialty; therefore, a control sample was not created (i.e. pediatrics).
- 5) Participants were limited to mothers with children age twelve and under.
- 6) Marital status was not classified differentiating between married, divorced, widowed, and single mothers.
- 7) External and personal factors, levels of experience, personal motivation, and the environmental factors surrounding testing may have influenced subjects' responses.
- 8) The subjects' analysis of daily time appeared to be waking time only.

9) The study does not suggest that adaptive responses are limited to those addressed in this survey.

Definitions

Adaptation - Ability to make flexible changes that enhance survival (Christiansen & Baum, 1991). Adaptation results from the interaction of the individual with the environment through purposeful activity.

Adaptive Responses - modifications made by an individual in response to an event or environmental demand (Christiansen and Baum, 1991).

Environment - external social and physical conditions or factors which have the potential to influence an individual (Campbell, 1981).

For the purpose of this study adaptive responses will refer to utilization and application of knowledge on the following subjects:

Body mechanics - use of the body in daily life activities and to the prevention and correction of problems related to posture (Davis, 1977).

Childhood development - the sequential progression of growth in the life cycle from infancy until the onset of puberty (Kaluger & Kaluger, 1979).

Energy conservation - techniques used to perform a task in the most efficient manner (Defined by author of this paper).

Interpersonal skills - ability to successfully interact with and to motivate others (Stoner, 1982).

Leisure - skills and performance in activities for amusement, relaxation, spontaneous enjoyment and self expression (AOTA, 1989).

Self care - physical daily living skills and performance of hygiene, feeding, dressing, mobility, and object manipulation (AOTA, 1989).

Stress management - ability to maintain a balance in normal function or routine in reaction to stress-stimuli (Campbell, 1981).

Time management - ability to set priorities in the scheduling of daily activities (Stoner, 1982).

Work - skills and performance in participating in socially purposeful and productive activities in home, school, employment, and community (AOTA, 1989).

Summary

Chapter I introduced the subject of this paper which is occupational therapists' use of specialized clinical skills in other areas of their lives. A review of literature provided the background of frames of reference and skills taught as part of occupational therapy curricula. However, it was discovered that there is limited material available regarding therapists' use of adaptive skills to balance their roles in the work/play/leisure continuum. A special survey was developed to provide a foundation for further research.

CHAPTER II

Review of Literature

The literature review addresses adaptation from the original theoretical base of occupational therapy through updated models of role theory and adaptive response concepts. Adaptation in occupational therapy; role conflicts, and personnel shortages (generated by the role conflict of mother and therapist) are explored.

Philosophy

Adolph Meyer (1922) stated we must "first recognize the need of adaptation and the value of work". His philosophy expanded into the use of occupational therapy in long term care in the early 1900's. The theoretical base is extended to the educational model which is drawn from medical, biological, and behavioral sciences (Rogers, 1983).

Theoretical Frames of Reference

The Model of Human Occupation was designed to organize the concept of occupation into a framework based on a general systems theory. Adaptation requires the system to satisfy its own internal urge to explore and master, as well as fulfill the demands of the environment (Kielhofner, 1980). Black (1976) stated that Occupational Behavior is a model based on role theory and may be used to assess role performance. Boundaries are based on expectations of society and the occupant of the role which requires the

development of adaptive skills and habits. Role behavior theory states that the skills and habits acquired in one role can be applied to future roles to effect successful outcomes. Thus, skills acquired as student and parent may be utilized in the role of therapist and parent.

Adaptation

Adaptive behavior is defined as "securing information about the environment, maintaining satisfactory internal conditions both for action and for processing information and maintaining autonomy" (Burke, 1984, p.25). Kleinman and Bulkley (1982) used descriptors of performance to parallel the stages of their adaptive continuum. Because of the dynamic nature of the individual as an open system and the changing nature of environments, it can be asserted that life itself represents a continuous process of adaptation.

Reed (1984) stated in the theory of adaptation through occupation that occupational balance is "a state in which a person's needs and demands are met through the performance of occupations in the three areas of self maintenance, productivity and leisure. Balance is influenced by individual situations, performances and age" (p. 501). Reed defined the three areas of adaptation as:

- 1) Self maintenance occupations (self-care) - those activities or tasks which are done routinely to maintain the person's health and well-being in the environment, i.e. dressing, self-care, activities of daily living, economic budgeter.

- 2) Productivity (work environment) - those activities or tasks which are done to enable the person to provide support to the self, family, and

society through the production of goods and services to promote health and well being, i.e. worker, volunteer, homemaker, home manager.

3) Leisure (play/leisure) - those activities or tasks done for the enjoyment and renewal that the activity or task brings to the person which may contribute to the promotion of health and well-being, i.e. recreation, avocation, play (Reed, 1984).

According to King (1978) individual adaptation refers to adjustments made by the individual that primarily enhance personal rather than species survival and secondly contribute to actualization of personal potential.

Inherent in individual adaptation are adaptive responses outlined by four characteristics:

- 1) The individual is active, not passive, in the process.
- 2) Environmental demands of needs, tasks and goals evoke the adaptive response.
- 3) The adaptive responses are organized at the subcortical level while the individual's attention is directed to the activity.
- 4) Adaptive responses are self-reinforcing.

Dubos (1978) stated in the words of educator John Dewey, "The brain is primarily the organ of a certain kind of behavior, not of knowing the world (p.79)." To the extent that the brain can make choices, it can direct adaptive responses. Dubos (1978) stated that human health transcends purely biological health because it depends primarily on those conscious and deliberate choices by which we select one mode of life and adapt, creatively, to its experiences.

Education

Rogers (1982) stated that competence implies adaptability in organizing skills into integrated courses of action to serve innumerable purposes. Competence is an overall strategy of adaptation consisting of thinking, deciding, doing and evaluating. Rogers (1983) described the occupational therapy curriculum in three major areas:

- 1) normal human development over the life span. A basic knowledge of biological, psychological, social and architectural schema is required for competence in the performance of daily living tasks.
- 2) functional disabilities associated with disease, trauma, developmental disorders, the aging process and environmental deprivation.
- 3) knowledge of the evaluation, remediation and prevention of functional disabilities through occupation.

Work/Play/Leisure

Shannon (1972) stated "In the Archives of Occupational Therapy, in 1922, Adolph Meyer proposed the work-play-rest-sleep continuum and the balance between each of these as the legitimate concern of occupational therapy" (p.171). From Meyer's basic philosophy, Shannon developed a work/play/theoretical model as a working model to focus away from illness or injury. He formulated a work/play model based on the following six premises:

- 1) Daily living activities consist of work and time free from work.
- 2) A balance in the work-play relationship must be maintained for positive physical and mental health.
- 3) Deficits in work-play experiences contribute to work-play dysfunction.

- 4) When people can no longer work or play and their sublimations fail them they become mentally ill.
- 5) Work-play skills may atrophy as a result of hospitalization.
- 6) The primary objective of the restoration process is toward resumption of an individuals' life plan and life tasks (Shannon, 1972).

Specialized Skills

In the totality of occupational therapy practice (DiJoseph, 1982) we have two unifying bonds:

- 1) Because of our training, we have the ability to look at mind, body and environment collectively.

- 2) We possess ability to elicit adaptive responses through use of appropriate stimuli which our nervous systems interpret as meaningful.

Sabari (1983) stated that occupational therapists assess the impact of biological, psychological, and environmental factors on individuals' functional performance in the areas of self-care, work, and play/leisure. Occupational therapy facilitates the functional independence of individuals through use of self-care, play/leisure and work occupations.

Role Conflict

Roland and Harris (1979) stated that career women in late twentieth century America experience enormous amounts of guilt and anxiety about trying to function simultaneously as wives, mothers and professionals. Most of all they complain about not enough time to spend with their children and husbands, to keep their households from slipping into chaos, and above all to meet their expectations of themselves as professionals. Change with

new opportunities, responsibilities, expectations and pressures gives rise to the need for new adaptations. Adaptations which are overt in the sense of daily functioning, and covert in the sense of inner psychological well-being are both necessary. Tittle and Denker, (1980) noted that the psychological barriers are evolved from views of traditional, appropriate roles for women. The image of homemaker, mother and/or volunteer and part-time worker has long been in conflict with reality for the majority of working women. Typically, women themselves raise barriers to clear delineation of roles by allowing feelings of guilt, conflict and ambivalence to dictate their concept of "proper" roles for women (Tittle & Denker, 1980).

Role conflict is defined as the stress that arises from role incompatibility when two or more roles are assumed at the same time, i.e. the stress created from attempting to simultaneously meet the demands of parent and professional. Two possible solutions for the resolution of such conflict are adaptation and retreatism. Either solution may have functional or dysfunctional results (Menks & Tupper, 1987). They described role conflict between motherhood and career in female occupational therapists and held that this conflict adversely affected their professional lives. This supported Mathewson (1975) who reported women between 30-44 years old are least likely to be employed due to their inability to satisfy both the traditional role of motherhood and that of working woman. Ninety-five percent of the occupational therapy population are female (AOTA, 1985). Manpower reports reflect concern about the supply pool being in constant flux as therapists leave the work force to raise families (AOTA, 1985). The demand for occupational therapists far outstrips the supply. Mathewson

(1975) encouraged therapists to combine practice with marriage and motherhood as role models for the profession.

A study performed by Bailey in 1990 reported therapists' most common reasons for leaving the profession as:

- 1) Childbearing and child rearing.
- 2) Geographic relocation and subsequent inability to find jobs.
- 3) Excessive paperwork.
- 4) Desire for increased salary and promotional opportunities.
- 5) High case loads, stress, and burnout.
- 6) The actual practice of occupational therapy not being what was expected.
- 7) Dissatisfaction with bureaucracy.
- 8) The chronicity and severity of the clients' illnesses.
- 9) An inability to find part-time work (p.23).

She also reported that the therapists who left the profession did not return to practice because they felt professionally out-of-date and experienced difficulty competing with the younger therapists. In Bailey's study therapists spoke of the stress of juggling their jobs and the needs of their families. The attrition of occupational therapists from the work force is a major contributor to the personnel shortage. Retention of these therapists is of primary importance in order to keep up with the supply and demand. If we are to retain these working mothers, we must make working conditions more amenable. Furthermore, mothers working as full-time occupational therapists experience frustration and guilt over leaving their children. Although their employers try to accommodate them with job-sharing and flexible schedules, full-timers have major problems

juggling work hours with day care schedules and unexpected emergencies (Brown, 1988).

Gilligan (1976) declared that the growth of the profession of occupational therapy seems to have paralleled the growth of the feminist movement. Bailey (1990) reported that labor statistics indicated that fewer women are routinely leaving their jobs when they have children; increasingly, women are combining careers with child rearing. Occupational therapy leaders are forced to manage changing roles and role expectations, as more women with children enter the profession (Gilligan, 1976). Huss (1981) stipulated that it takes an intelligent, creative, adaptive, risk-taking, secure, caring individual to be an occupational therapist.

Gwon (1989) related that the ability to analyze activities by looking at their components carries over into the skillful way in which the occupational therapist views people. The occupational therapist is trained to look at a person's medical, functional (self-care), sensory, motor, perceptual, cognitive and psycho-social states as a complete unit to constitute a whole being. Do these skills generalize to the role of the working parent?

Summary

The literature in the field of occupational therapy does not describe the roles/adaptations of occupational therapists and how they relate specifically to the roles of working mothers. This study is an initial step in investigating this relationship.

CHAPTER III

Methodology

Subjects

A group of 30 subjects was randomly selected to participate in a pilot study and to complete surveys. The subjects were occupational therapists selected from the Trinity North District of Texas Occupational Therapy Association membership directory. The subjects resided in the geographical area represented by this district, were employed a minimum of 30 hours a week as occupational therapists and were mothers of children age 12 and under.

Instrument

The survey (see Appendix A) was developed for the purpose of this study. It was designed to elicit data on adaptive skills used by occupational therapists as professionals and mothers. The subjects were asked to grade themselves on knowledge and utilization of adaptive responses and in productivity in their occupational behaviors in work, leisure, and self-maintenance roles. Three open-ended questions required subjects to define (in their own words) work, leisure and self-maintenance. The survey elaborated on these topics by listing questions to which the therapists responded on a five-point scale, with one being least and five most.

Procedure

To confirm that subjects met the criteria and were selected randomly, every third person listed in the membership directory was contacted by telephone. Participants were selected or rejected based on their responses to these questions:

- 1) Are you employed as an occupational therapist 30 hours a week or more?
- 2) Are you the mother of children age 12 or under residing in your home?
- 3) Is the address listed in the membership directory correct? If no, the correct address was solicited and verified for correct geographical location.

This procedure was repeated until 30 subjects who met the criteria and were willing to participate were selected. Surveys were mailed to all subjects with return stamped, self-addressed envelopes enclosed. For the purpose of anonymity the subjects were instructed to not put their names on the surveys or on the return envelopes.

As envelopes were returned the contents of each was assigned a letter of the alphabet in sequence. This was to ensure that the demographic data remained with the corresponding survey. To protect confidentiality, the names of the participants are not recorded in this thesis nor will they be released. Responses were recorded in the computer by alphabet assignment and averages reported accordingly.

The number of children reported in each age group and in specific school groupings were reported. Other subjective data for the three open ended questions on productivity, leisure/play, and self-maintenance, were recorded in a frequency response chart showing the most frequent response

first. A pie chart demonstrated the analysis of daily time use reported by the respondents. The averages of the 31 questions which were answered with a rating of 1-5 were divided into subcategories of productivity (lines of communication, interpersonal skills, time management, body mechanics, energy conservation), play-leisure (play, recreation, relaxation, changing of activities), self-maintenance (education, developmental knowledge, personal growth, personal care, stress management, assessment, assistive devices, and adaptive equipment). Averages are reported for each of these groupings and the results are listed in order of most to least important. The results are discussed in Chapter IV.

CHAPTER IV

The purpose of this study was to investigate the adaptive skills of occupational therapists acquired in the areas of productivity, play-leisure, and self-maintenance and utilized in performing the dual roles of mother and professional.

Findings

Chapter IV presents and discusses the results of this study. It is subdivided into 5 sections: (1) descriptions of the respondents (2) demographic data, (3) subjective data, (4) survey results, (5) analysis and interpretations of research questions. A descriptive analysis will be used in reporting the results.

Descriptions of Respondents

The survey was mailed to 30 subjects who had been previously contacted by telephone for confirmation of eligibility and willingness to participate. Twenty subjects responded to the surveys giving a response rate of 66.67%. Of the 20 responding, 2 did not answer the 3 subjective questions regarding productivity, play and leisure, and self-care but completed the rest of the survey.

Demographic Data

The demographic data yielded the following results. Twenty respondents had an aggregate of 36 children (17 males, 19 females).

Number of children per family ranged from 1 to 3 with a mean of 1.8 and a median of 2. Age ranges of the children are listed in Table 1.

Table 1

Age Ranges for Children of Working Occupational Therapy Mothers

Age	Frequency	Percentage
Preschool	15	41.6
Kindergarten	6	16.8
Grades 1-6	15	41.6
Age	Frequency	Percentage
0-2	4	11.2
3	7	19.5
4	4	11.2
5	6	16.8
6	3	8.3
7	3	8.3
8	2	5.5
9	3	8.3
10	2	5.5
11	1	2.7
12	1	2.7
Totals	36	100.0

Two respondents had children over age twelve as well as a child in the requested age limit. The two older children were ages 18 and 13.

Subjective Data

Many of the responses to a given open-ended question, though not identical word choice, were synonymous. These responses were considered as same. The most frequent responses are listed with the actual number of responses printed in parenthesis.

Productivity was defined as job/work/duties (13), achieve a goal (12), care of family (5), monetary and personal gain (4), and housecleaning (4).

Leisure/Play was defined as relaxation/without pressure/unstructured time (11), activities enjoyed/pleasure (10), family time (5), and recreation (5).

Self-maintenance was defined as total care of body, mind and spirit (17), Activities of Daily Living (ADL) (6), rest/sleep (4), time for self and weight maintenance (4). Subjective data collected are presented in Table 2.

Table 2.

Responses To Subjective Questions Requesting Specific Definitions

Question	Responses	Frequency
Productivity	job/work/duties	13
	achieve goal	12
	care of family/pet care	5
(table continues)		

Question	Responses	Frequency
Productivity	monetary and personal gain	4
	cleaning house	4
	professional and personal contribution	2
	produce product	2
	community	1
	time is scheduled	1
Leisure/Play	relaxation without pressure/	
	unstructured time	11
	activities enjoyed/pleasure	10
	family time	5
	recreation sports, crafts, train dog	5
	read	4
Leisure/Play	satisfying personal needs	2
	vacations/travel	2
	eating out/entertainment	2
	community involvement	1
Self-Maintenance	total care of body, mind and spirit	17
	ADL's	6
	rest/sleep	4
	time for self/weight maintenance	4
	leisure	2
	errands/shopping	2
	family care/pet care	2

Daily time use was recorded on a pie chart, with the average responses demonstrating 67% of the day on productivity, 16.1% on leisure and 16.9% on self-care. Appendix B shows the analysis of average daily time use.

Survey Results

In the questionnaire, numbers 5-35 were subjective questions rating the response 1-5, with 1 being least and 5 being most. Results are in Table 3.

Table 3

Averages of Rankings for Subjective Questions

Questions	Averages
Productivity	
5. How effective are your time management techniques at work?	3.95
6. In the last month did you meet the deadlines of your assigned work?	4.24
7. How effective are your time management techniques at home?	3.38
8. In the last month did you meet your personal agenda?	3.57
9. To what degree do you employ energy conservation techniques in completing daily work tasks?	3.52
10. Do you use energy conservation techniques in self-care tasks?	3.33
(table continues)	

Questions	Averages
11. Do you teach your children energy conservation techniques?	2.86
12. How often do you consciously apply good body mechanics to lifting tasks?	4.05
13. Do you teach family members how to use good body mechanics?	3.33
14. How effective are your interpersonal skills in the work place?	4.19
15. How effective are interpersonal skills with spouse?	3.90
with children?	3.81
16. Have you established good lines of communication with coworkers?	4.29
with family members?	4.00
Leisure	
17. How important are leisure and play activities at home?	3.52
18. To what degree are family activities an important part of your family structure?	3.95
19. Do you consider playing with your children to be leisure time?	4.05
20. How often are personal leisure and play issues addressed in the work environment?	2.38

(table continues)

Questions	Averages
<hr/>	
21. To what degree do you include family members in company picnics and parties?	3.00
22. How much do you participate in recreational activities with coworkers?	1.71
family members?	4.14
friends?	3.19
23. How much is relaxation a part of your leisure/play?	2.71
24. Is your involvement in recreational activities relaxing to you?	3.24
25. How easy is it for you to change leisure time activities?	2.85
Self-Maintenance	
26. How much did education in child development influence your ability to perform your role as a mother?	3.62
27. Do you use assessment/evaluation tools with your children?	3.22
formally?	2.29
informally?	3.43
28. Do you purposefully select developmental toys/tasks for your children?	4.19
29. Are you consciously aware of the developmental steps as your child achieves them?	4.19

(table continues)

Questions	Averages
<hr/>	
30. How effective are you in handling stressful situations involving family and friends?	3.48
31. To what degree do you use stress management techniques in your daily routine?	2.95
at work?	3.05
at home?	2.67
at play?	2.90
32. Is your environment conducive to personal growth and development?	3.45
at home?	3.48
at work?	3.43
in the community?	3.00
33. What is the balance of time spent on personal care for yourself?	2.29
for your children?	3.76
34. Do you use adaptive equipment with self?	1.52
with spouse?	1.20
with children?	1.57
35. Do you use assistive devices at work?	2.05
at home?	1.80
in the community?	1.38
<hr/>	

The averages to the 31 general subjective questions can be subdivided into the 3 subject areas and then further reduced for analysis to specific

adaptive responses. Table 4 presents the average rankings of the subcategories for the subject area of productivity.

Table 4

Averages of Rankings of Productivity Subcategories

Subject	Relationship	Averages
Lines of communication	Work - 4.28	Average: 4.14
	Family members - 4.00	
Interpersonal skills	Work - 4.19	Average: 3.96
	Spouse - 3.90	
	Children - 3.80	
Time management	Home - 3.47	Average: 3.78
	Work - 4.09	
Body mechanics	Self - 4.04	Average: 3.68
	Family - 3.33	
Energy conservation	Work - 3.52	Average: 3.42
	Self - 3.33	
	Children - 2.85	

Overall, the therapists' responses regarding special skills received in occupational therapy training indicate these skills are utilized in roles other than the professional role. Therapists ranked the ability to maintain lines of communication as the most important skill, more so at work than at home. The other skills were all ranked at the top half of the scale in the

following order: interpersonal skills, time management, body mechanics and energy conservation. The components of productivity special skills are ranked as most important in the workplace.

Leisure special skills are ranked as more important in the non-work relationships. Leisure time activities planned around children are rated higher than time for self or family. (See Table 5)

Table 5

Averages Of Rankings Of Leisure Subcategories

Subject	Relationship		Averages
Play	Home	3.52	Average: 3.37
	Self	3.95	
	Children	4.04	
	Work-Personal	2.38	
	Family	3.0	
Recreation	Co-workers	1.71	Average: 3.01
	Family	4.14	
	Friends	3.19	
Relaxation	Play	2.71	Average: 2.97
	Self	3.23	
Change activities	Self	2.85	Average: 2.85

Overall, play and recreation skills are ranked higher than relaxation. Self-maintenance includes the knowledge of as well as the application of

adaptive responses acquired as special skills of occupational therapists in relationship to their roles of working mothers. (See Table 6)

Table 6

Averages Of Rankings of Self-Maintenance Subcategories

Subject	Relationship		Averages
Developmental	Toys	4.19	Average: 4.19
	Steps	4.19	
Education	Role of mother	3.6	Average: 3.6
Personal growth	Self	3.45	Average: 3.33
	Work	3.42	
	Home	3.47	
	Community	3.0	
Personal Care	Self	2.28	Average:3.02
	Children	3.76	
Stress Management	Family and friends	3.47	Average: 3.0
	Daily routine	2.95	
	Work	3.04	
	Home	2.66	
	Play	2.90	
Assessment	Children	3.22	Average:2.97
	Formal	2.28	
	Informal	3.42	

(table continues)

Subject	Relationship	Averages	
Assistive Devices	Work	2.05	Average:1.74
	Home	1.8	
	Community	1.38	
Adaptive Equipment	Self	1.52	Average:1.43
	Spouse	1.2	
	Children	1.57	

In self-maintenance therapists ranked developmental knowledge the most important with a rating of 4.1. Assistive devices and adaptive equipment application was rated extremely low.

Summary

The subjects' children were predominantly age 5 and under. The subjects reported they spent 67% of their day on productivity, with the balance of their day divided equally between self-care and leisure-time. It would appear the responses are on a waking day rather than the expected 24-hour day.

The responses to the narrative questions define productivity as job or work; leisure time as relaxation; and self-maintenance as care of body, mind, and spirit. They report utilization of special skills received in occupational therapy training as high. Communication skills, developmental knowledge and play with their children are considered the most used at this

point and time. Being used the least are assistive devices and adaptive equipment.

The significance of the findings in relationship to the research questions are discussed in Chapter V.

Chapter V

Summary and Conclusions

The purpose of this study was to investigate the adaptive skills of occupational therapists used to fulfill the dual roles of mother and professional. Thirty subjects were randomly selected from the Trinity North District of Texas Occupational Therapy Association membership directory. Potential subjects were contacted by telephone to verify eligibility and willingness to participate. A survey, developed by the author, was mailed to the subjects for a pilot study. The survey completed by each subject consisted of 3 subjective questions, a pie graph, and 31 questions to rank 1 to 5 regarding productivity, leisure, and self-maintenance. Twenty subjects responded to the survey yielding a response rate of 66.67%. It is interesting to note that 30 people agreed to participate, yet only 20 actually completed the survey.

The main findings of the survey indicated that occupational therapy mothers use adaptive responses from their occupational therapy education in roles other than their formal work environments. Time management, communication skills, knowledge of body mechanics, energy conservation techniques, interpersonal skills, and developmental knowledge are all rated at the top of the scale. The therapists do consider their specialized knowledge and skills in developmental processes and in establishing lines of communication (work and home environments) as extremely important, ranking them 4.19 and 4.14 respectfully on a scale of 1 to 5. However,

they minimize the importance of their knowledge and utilization of adaptive responses in the special skills area of assistive devices/adaptive equipment with rankings of 1.74 and 1.43 respectively.

The occupational therapy definition for purposes of licensure states in part: "specific occupational therapy services include, but are not limited tothe use of specifically designed crafts; guidance in the selection and use of adaptive equipment and consultation concerning the adaptation of physical environments....." (Hopkins & Smith, 1978, p.707). In view of the previous statement on the skills of an occupational therapist, it appears that the low ranking of utilization of assistive devices and adaptive equipment by the subjects may be due to a misinterpretation of the question. Recreation, play and leisure are ranked at the midpoint of the scale.

Based on the proposition by Meyer (Shannon, 1972) that a balance between work-play-rest-sleep is a legitimate concern of occupational therapy, there arises a concern regarding these responses. Do occupational therapists who are also mothers really put their needs and interests last, or are the results based in an error in the structure of these questions? The results show that the subjects spent 67% of their time on productivity, 16.1% on leisure and 16.9% on self-maintenance. The nature of the responses indicate the answers were based on subjects' actual waking hours instead of a 24 hour day. Since waking hours could vary it is not possible to determine if the responses represent the same amount of hours per day from subject to subject. It will be necessary to do further studies to identify actual number of hours per day as opposed to percent of day to establish

whether or not working occupational therapist mothers achieve a balance in the work/play/leisure continuum.

Analysis of Responses to Research Questions

1. To what degree do working occupational therapy mothers consider that they utilize occupational therapy adaptive responses acquired in time management, energy conservation, body mechanics, child development and interpersonal relationships? It appears that occupational therapists use adaptive responses from their training in roles other than their work environments. Time management, communication skills, knowledge of body mechanics, energy conservation techniques, interpersonal skills, and developmental knowledge were all rated from 3 to 5 on a scale of 1 to 5.

2. How important is play/leisure time to occupational therapists who are working mothers? Recreation, play and leisure are ranked at an average of 3, the midpoint of the scale. However, play activities involving mom and family are ranked higher than 3, and play activities involving mom alone or her coworkers are ranked below 3.

3. Do self-maintenance skills, as taught and practiced in occupational therapy, better assist the working occupational therapy mother in establishing a balance in the work/play continuum? The balance in a work/play continuum was not directly established. The therapists do consider their specialized knowledge and skills in developmental processes and environmental awareness as extremely important. However, utilization of adaptive/assistive devices and stress management skills rank very low on the self-maintenance scale.

It appears that the working occupational therapist mother uses her

special knowledge extensively in the work place, the home environment, and with the family group. However, the therapist mother does not rank personal leisure, individual self-maintenance and personal stress management care very high.

Implications

Based on the results of this study, the following implications were identified:

1. Occupational therapists do use specialized knowledge unique to their profession to assist in performance of their other life roles.
2. Occupational therapist mothers tend to meet their own needs last, negating a balance of work/play/leisure, which is considered critical in their professional frame of reference. This appears to be a contradiction in generalization and application of their professional training.
3. Respondents to this survey may have construed assistive devices/adaptive equipment as indigenous to the profession (i.e. splints, long handled shoe horns, button holer), and did not recognize everyday tool use as assistive or adaptive (i.e. velcro closure tennis shoes).
4. There appears to be a lack of clear definition for occupational therapy special skills i.e. energy conservation, work simplification.
5. The subjects responding to this survey appeared to have a lack of uniformity and clear definition of their roles as occupational therapists. The question arises as to the degree to which this of lack of uniformity generalizes to the profession.

Recommendation for Further Research

The following recommendations would serve to strengthen future studies in this area:

1. Larger population samples from a more diverse geographical representation would assist in the generalization of findings.
2. Comparative studies between occupational therapists and working mothers in other professions would assist in identifying the specificity of skills unique to occupational therapy.
3. A comparative study of occupational therapists by specialty area of practice might better identify specific skills from each of the bio-psycho-social frames of reference.

It is the opinion of this researcher that more studies regarding the utilization of special knowledge and the special needs of working mothers in occupational therapy should be conducted.

Completed surveys are not included with this document. Copies are available from author upon receipt of written request. Names of the subjects, potential and actual, will not be released.

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APPENDICES

APPENDIX A

Survey

Survey

Define (in your own words):

1. Productivity: (work)

2. Leisure/Play:

3. Self-Maintenance: (self-care)

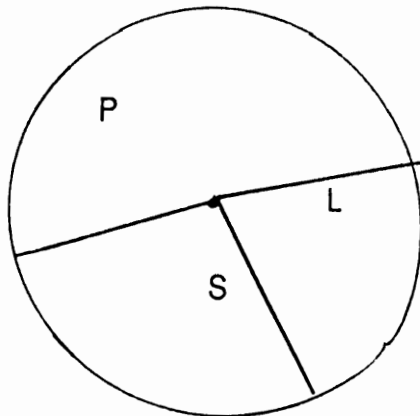
Divide this pie chart into the amount of time you spend in each category (monthly).

(P)roductivity

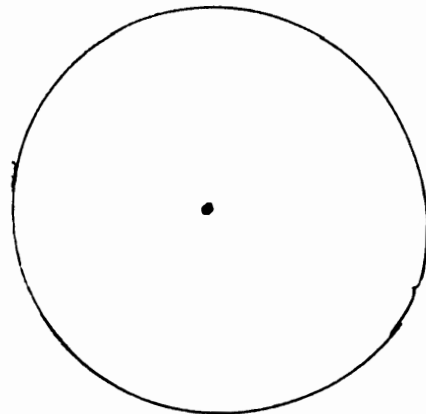
(L)eisure

(S)elf-care

4. Sample:



Please complete:



Circle the one that applies most to your situation.

Productivity:

5. How effective are your time management techniques at work?

Least		-		Most
1	2	3	4	5

6. In the last month did you meet the deadlines of your assigned work?

Least		-		Most
1	2	3	4	5

7. How effective are your time management techniques at home?	Least	-	Most
	1 2 3 4 5		
8. In the last month did you meet your personal agenda?	Least	-	Most
	1 2 3 4 5		
9. To what degree do you employ energy conservation techniques in completing daily work tasks?	Least	-	Most
	1 2 3 4 5		
10. Do you use energy conservation techniques in self-care tasks?	Least	-	Most
	1 2 3 4 5		
11. Do you teach your children energy conservation techniques?	Least	-	Most
	1 2 3 4 5		
12. How often do you consciously apply good body mechanics to lifting tasks?	Least	-	Most
	1 2 3 4 5		
13. Do you teach family members how to use good body mechanics?	Least	-	Most
	1 2 3 4 5		
14. How effective are your interpersonal skills in the work place?	Least	-	Most
	1 2 3 4 5		
15. How effective are interpersonal skills with spouse?	Least	-	Most
with children?	1 2 3 4 5		
16. Have you established good lines of communication with co-workers?	Least	-	Most
with family members?	1 2 3 4 5		

Leisure:

Circle the one that applies most to your situation.

- | | | | |
|---|-----------------------|---|------|
| 17. How important are leisure and play activities at home? | Least | - | Most |
| | 1 2 3 4 5 | | |
| 18. To what degree are family activities an important part of your family structure? | Least | - | Most |
| | 1 2 3 4 5 | | |
| 19. Do you consider playing with your children to be leisure time? | Least | - | Most |
| | 1 2 3 4 5 | | |
| 20. How often are personal leisure and play issues addressed in the work environment? | Least | - | Most |
| | 1 2 3 4 5 | | |
| 21. To what degree do you include family members in company picnics and parties? | Least | - | Most |
| | 1 2 3 4 5 | | |
| 22. How much do you participate in recreational activities with co-workers? | Least | - | Most |
| family members? | 1 2 3 4 5 | | |
| friends? | 1 2 3 4 5 | | |
| 23. How much is relaxation a part of your leisure/play? | Least | - | Most |
| | 1 2 3 4 5 | | |
| 24. Is your involvement in recreational activities relaxing to you? | Least | - | Most |
| | 1 2 3 4 5 | | |
| 25. How easy is it for you to change leisure time activities? | Least | - | Most |
| | 1 2 3 4 5 | | |

Self-Maintenance:

26. How much did education in child development influence your ability to perform your role as a mother?	Least	-	Most		
	1	2	3	4	5
27. Do you use assessment/evaluation tools with your children?	Least	-	Most		
formally?	1	2	3	4	5
informally?	1	2	3	4	5
28. Do you purposefully select developmental toys/tasks for your children?	Least	-	Most		
	1	2	3	4	5
29. Are you consciously aware of the developmental steps as your child achieves them?	Least	-	Most		
	1	2	3	4	5
30. How effective are you in handling stressful situations involving family and friends?	Least	-	Most		
	1	2	3	4	5
31. To what degree do you use stress management techniques in your daily routine?	Least	-	Most		
at work?	1	2	3	4	5
at home?	1	2	3	4	5
at play?	1	2	3	4	5
32. Is your environment conducive to personal growth and development?	Least	-	Most		
at home?	1	2	3	4	5
at work?	1	2	3	4	5
in the community?	1	2	3	4	5
33. What is the balance of time spent on personal care for yourself?	Least	-	Most		
for your children?	1	2	3	4	5

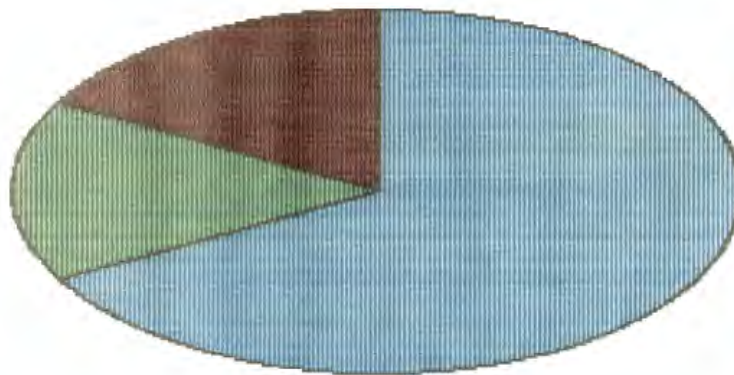
34. Do you use adaptive equipment	Least		-	Most	
with self?	1	2	3	4	5
with spouse?	1	2	3	4	5
with children?	1	2	3	4	5
35. Do you use assistive devices	Least		-	Most	
at work?	1	2	3	4	5
at home?	1	2	3	4	5
in the community?	1	2	3	4	5




Please list number of children, age, and sex of each child.

Thank you for completing this survey.

APPENDIX B

Average of Analysis of Daily Time Use on a Pie Chart



	67.0%	67.0476	Productivity
	16.1%	16.0952	Leisure
	16.9%	16.8571	Self Care