

Short Report

The open question, 'What prevents you from reaching occupational balance?', was posed within a questionnaire aimed at exploring the meanings of occupation, health and wellbeing with a cohort of first-year occupational therapy students during their initial few weeks at university. Their written responses to the question about occupational balance were analysed and are discussed in this paper. Not surprisingly, occupational balance appeared to be achieved by only a few and more by chance than design.

People, time and money factors were identified as the main impediments to achieving occupational balance, with psychological and emotional pressures being at the forefront. Interestingly, despite these barriers, the overall educational benefit of considering the occupational balance question in this way raised the students' awareness of its relationship to health and wellbeing. This increased awareness might have longer-term health benefits, both personally and professionally, which would be worthy of further research.

Occupational Balance: What Tips the Scales for New Students?

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Introduction

Occupational therapy is based on the premise that what people do can influence the state of their health (West 1970, Finn 1977, Wilcock 1998a, 1998b). In recent years, in this regard, many in the profession have found it useful to view people as occupational beings so that this distinctive way of considering health is not overlooked (Yerxa 1993, 2000a, 2000b, Kielhofner 2002). Understanding the self as an occupational being is the first step towards appreciating the nature and needs of others from this perspective. At Brunel University, within a first-year undergraduate module designed to explore the nature of occupation, a number of concepts are considered, including the notion of occupational balance.

Rationale and research aims

This paper considers ideas about occupational balance held by beginning level occupational therapy students. Since occupational balance is linked directly to health and wellbeing (Wilcock 1998a), a thorough understanding of the nature of this balance is vital for occupational therapists using occupation as a medium for intervention. Additionally, since occupational balance is an often-overlooked aspect of health and wellbeing, it is important to introduce it as a central concept early in the students' career. The belief that balanced occupations can contribute to health and wellbeing is well established in the occupational therapy literature, but the causal relationship has not been substantiated by research evidence to date (Christiansen and Baum 1997).

Specifically, the paper reports on the factors that new occupational therapy students perceive as preventing the attainment of occupational balance for themselves. The research was also used as an educational tool, with the aims of enabling occupational therapy students at the beginning of their education to:

- Identify the factors that affect occupational balance
- Begin to understand themselves as occupational beings
- Develop an appreciation of the relationship between occupation and health
- Introduce the habit of collecting evidence on which to base practice.

Literature review

The emerging subject of occupational science, which is the study of people as occupational beings (Yerxa 1993, 2000a, 2000b), has been introduced into the educational curricula of several occupational therapy undergraduate courses in the United Kingdom during the last few years (Mounter and Ilott 1997). The new requirements of the World Federation of Occupational Therapists' minimum standards for education advocate an occupational perspective for health that is in accord with these initiatives (WFOT 2002). In agreement with this, Wilcock (2003) espoused an occupational approach towards education that recognises students themselves as occupational beings with different capacities and abilities.

In focusing specifically on the notion of occupational balance, it is interesting to find that Meyer (1922) introduced

the notion of balance early in the philosophy of occupational therapy. Later and more recent studies of occupational balance and health have focused on the relationship between work, rest, leisure and self-care (Rogers 1984, Spencer 1989, Christiansen 1996) and the classifying of occupational balance in this way remains central in current occupational therapy literature, in particular when considering models of practice (Reed and Sanderson 1992, CAOT 2002, Kielhofner 2002).

Wilcock and her colleagues in 1997 took a different approach in looking at the relationship between occupational balance and health by using the classification of physical, mental, social and rest occupations. They found that the participants who reported their current balance to be closest to their ideal balance also reported their health to be fair or excellent. Lovelock et al (2002) replicated this study with similar results. Both studies illustrate the complex nature of the concept of balance and the subjective nature of the experience and perception of health. What does emerge clearly, however, is the strong perceived effect of occupational balance on health.

Westhorp (2003) discussed the concept of lifestyle balance in terms of occupations in considerable detail, citing evidence from educational, historical and contemporary perspectives. She proposed a dynamic cycle of change, within which an individual's control was a vital element for the maintenance of health and wellbeing. However, there was an acknowledgement that the topic had not been well researched by occupational therapists to date.

Definitions of occupational balance and related terms are usefully presented in table form by Backman (2004), who provided an updated overview of occupational balance by exploring the relationships among daily occupations and their influence on wellbeing.

Despite a general increase in the awareness of the concept of occupational balance, for example in the form of the United Kingdom Government's work-life balance campaign (Department of Trade and Industry 2002), the mechanisms for ensuring a balanced lifestyle remain elusive.

With a rise in fatigue-related disorders associated with 'burnout' (Cox 2000, Glouberman 2002) and the relationship between occupational imbalance, stress and health consequences being widely acknowledged (World Health Organisation 1999), it is incumbent upon occupational therapists to have an understanding of the multifaceted nature and importance of occupational balance for both themselves and their clients. For occupational therapy students who, like other people, are at risk of being occupationally imbalanced, a good place to start this exploration is at the beginning of their education by engaging in the process of considering themselves from an occupational perspective.

Method

Participants

The participant pool was all full-time and part-time first-year students enrolled on the BSc(Hons) Occupational Therapy

course at Brunel University and undertaking 'The nature of occupation' module, which ran for 12 weeks in the first semester.

Procedure

A questionnaire was designed and formulated by members of the module's teaching team in consultation with an experienced researcher and covered a range of topics about students' subjective views of issues concerned with the relationship between occupation, health and wellbeing. The whole questionnaire, entitled 'Occupation, what's in it for me?', was distributed to all students who attended a one-hour lecture followed by a workshop early on in the module and was completed within the timeframe of the workshop. The main issues that constitute the individual as an occupational being and the factors influencing engagement in occupation were explored using the questionnaire.

The answers to one of the questions concerning occupational balance were selected for detailed analysis and are reported in this paper. The question was: 'What prevents you from reaching occupational balance?'

Ethics

The questionnaire was approved by the chair of the Departmental Ethics Committee at Brunel University. Participation by submitting the completed questionnaire was entirely voluntary, the students having been informed that the answers to the questionnaires would be analysed anonymously with a view to possible publication.

Analysis

The responses from the open question 'What prevents you from reaching occupational balance?' were initially coded according to similar meanings and concepts and allocated a category as the themes emerged. These thematic categories were established rigorously and systematically according to the traditions of qualitative research (Robson 2002). Many hours were spent in immersion in the data followed by reflection, discussion and inter-researcher checks.

Subsequently, the emergent categories were further refined and coded, with reference to a section of the WFOT's (2002) new requirements of the minimum standards entitled 'Essential knowledge, skills and attitudes for competent practice'. Within this, a subsection framed as 'The person-occupation-environment relationship and its relationship to health' appears as the foundation on which the other domains rest (WFOT 2002, pp13-16). Specifically, it outlines the Person-Knowledge and Person-Skills parameters, which were applied to the data in the largest category.

The initial coding results indicated that more detailed and meaningful analysis could be usefully applied to meet the aims of the study. Retrospectively, it was seen as appropriate to analyse the data further in this way because the new requirements of the WFOT minimum standards sat well with the intended learning outcomes of the module.

The WFOT person factors were labelled as shown in Table 1 (for example, PK2 and PS1), according to the order and descriptors that appear in the minimum standards document, and were used in the secondary coding analysis.

Table 1. Labels given to the WFOT's (2002) person factors

Person-Knowledge of theories and research findings (PK)

PK2: Feelings about, reflections on and interpretation of past, present and future participation in occupation.

PK3: The relationship between occupation and human development over the lifespan.

PK4: The relationship between psychological factors and occupation.

PK7: How changes or challenges to body structure and function, the course of development, social or cultural disruption or the personal meaning of occupation may alter people's participation in occupation or their experience of occupation.

Person-Skills (PS)

PS1: Assessing personal factors that affect participation.

Along the same lines, environmental factors that also emerged from the person-based responses were applied to the data. The WFOT environmental factors were labelled as shown in Table 2 and were similarly used in the secondary coding analysis.

Table 2. Labels given to the WFOT's (2002) environmental factors

Environment-Knowledge (EK)

EK1: How aspects of the social and cultural environment, such as family, friends, members of the community, employers and teachers, affect people's participation in occupation.

EK2: How resources in the environment, such as the design of buildings, town planning, transport and playgrounds and the local geography, affect people's participation in occupation.

EK3: How aspects of the institutional environment, such as institutional racism, apartheid and poverty, affect people's participation in occupation.

Environment-Skills (ES)

ES1: Assessing how the environment facilitates or creates barriers to participation in occupation.

Results

Initial coding

The initial coding of the answers from the students who agreed to participate (n = 98) identified three main categories, namely people factors, time factors and money factors, which were having an impact on occupational balance. The distribution favoured the first of these, there being 80 responses in this category. There were 22 in the time category and 17 in the money category. A small group of the participants (n = 5) identified no factor preventing them achieving occupational balance. The initial coding results are illustrated in Fig. 1.

Secondary coding

Secondary coding of the people factors category according to the WFOT subsections, as described above, identified five main person factors and one generic environmental one. The key words and phrases used for the person factors are shown in Table 3. The detailed frequency of these analysed responses, which totalled 60, is presented in Fig. 2.

Fig. 1. Initial coding results.

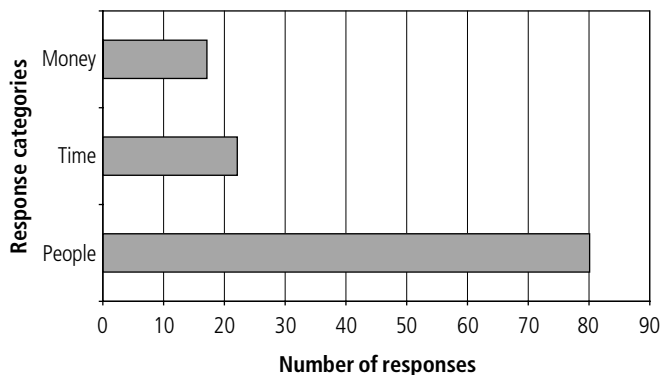


Table 3. Secondary coding results: person factors, key words and phrases used

Person-Knowledge of theories and research findings (PK)

PK2: Past history. Life events. Value systems and priorities.

PK3: Age.

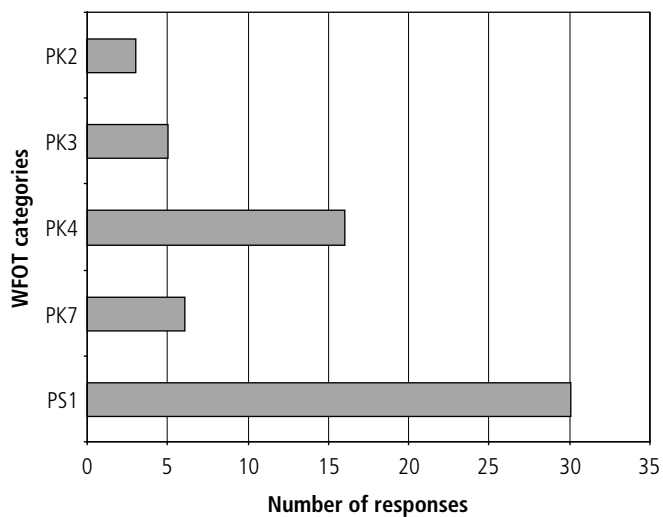
PK4: Motivation. Feelings. Willpower. Confidence. Fears and concerns. Emotions. Attitudes. Stress. Pressure. Worries. Negativity.

PK7: Fitness. Diet. Health.

Person-Skills (PS)

PS1: Lack of: understanding, organisation, education, experience, capability. Personal abilities. Skills. Knowledge. Level of enjoyment and goals. Restrictive beliefs and approaches. Dislike of change.

Fig. 2. Secondary coding results: person factors.



The remaining responses in the environmental category, which totalled 20, were encapsulated by two subsections of the WFOT descriptors (EK1 and EK2). These cover knowledge and skills in relation to individuals, communities, societies, and the built and the institutional environment, as illustrated in Table 2.

The key words and phrases used in the environmental category are shown in Table 4. There were 12 responses in the EK1 subsection and 8 in the EK2 subsection.

Table 4. Secondary coding results: environmental factors, key words and phrases used

Environment-Knowledge (EK)

EK1: Family commitments. People around me. Cultural norms.
Media. TV and society. Uni. Family living arrangements.
Others' restrictive influence. Ties. Demands. Others.

EK2: Location. Country. Environment.

Summary of results

From these results it can be seen that the data collected from the question 'What prevents you from reaching occupational balance?' yielded some interesting findings, namely that the highest number of responses was concerned with personal and interpersonal influences within the social environment, with time and money also being of note but mentioned less frequently overall.

Discussion

The question of balance

The students' views of what prevented their own achievement of occupational balance revealed some important insights for the teaching of students about the relationship between health and occupation. Running research questions past student groups in a formal way, as was done in this study, is a useful mechanism for raising awareness of what needs to be known. Indeed, this approach seems to have given added value to the concept of occupational balance in the eyes of many students, according to the module evaluations. The process also demonstrated a research technique that the students were part of and modelled the practice of collecting viable evidence.

All but five participants identified some factors that prevented them from attaining occupational balance. Given that previous studies (Wilcock et al 1997, Lovelock et al 2002) highlight that occupational balance has a direct beneficial effect on perceived health, it is of concern that such a small number identified that no factor was preventing them from achieving this. In other words, only a small minority perceived themselves to have no impediment to occupational balance at that point in time, whereas the majority could be assumed to be occupationally imbalanced in some way owing to the many barriers that they identified.

Although the students at the beginning of their education could be expected to be balancing life roles in transition, it could equally be argued that, having chosen a course of study, a balance of some sort might have been arrived at. It seems that this was not the case for the majority of students in the study. The potential longer-term health consequences of feeling out of balance are of concern, but balance is by its very nature a dynamic phenomenon. It has therefore been difficult to find direct causal links despite the work of a few researchers who have attempted to do so (Backman 2004).

The strength of the responses that related to people factors as being the main barrier to achieving occupational balance, which led to further analysis of this category using

the WFOT (2002) minimum standards for education, revealed the high number of participants who identified a lack of knowledge or skill concerning the question of occupational balance from a personal point of view. Since the students were asked to look at themselves, it is not too surprising that personal issues such as lack of experience, restrictive beliefs and inability to complete tasks efficiently and effectively were reported. Nor is it surprising that this lack of knowledge and skill was highlighted at this point in time, given the very early stage of professional education. However, the main impediments to achieving balance point to psychological and emotional pressures more than to physical factors.

Given the increase in reported mental health problems in the student population (Royal College of Psychiatrists 2003), these psychological factors are worth taking seriously. Identifying these factors early on could be valuable because they offer reasons for students to consider further the importance of a balanced occupational perspective, both for themselves and for their potential clients, during their first placement.

The environmental influences reported by some, for example family living arrangements and cultural norms, could reflect the more mature and complex profile of present-day students (Craik and Zaccaria 2003) and also the fact that, collectively, work-life balance has been given much recent media coverage, being of concern nationally and internationally (World Health Organisation 1999, Health and Safety Executive 2002). However, the lack of detail in these responses precludes more meaningful speculation.

Time and money were also cited in a number of the responses as restricting occupational balance. It could be considered a fairly predictable characteristic that, in general, the range of people's occupational choices would be principally circumscribed by a lack of time or money. This view was reflected by some, although by no means all, of the student participants. Having said that, time and money are important factors and it has been known for some time that these wider social and political issues deserve more informed study when considering health and wellbeing (Blaxter 1990).

Limitations

Analysing a specific question within a questionnaire could be viewed as a limitation in that the full context of all the occupational factors being explored was not presented. However, in this instance it was felt to be justified in order to highlight a particular and sometimes overlooked aspect of occupational science. The question itself asked what prevented the attainment of occupational balance but did not actually ask if occupational balance was being achieved. It was therefore assumed that by identifying that there was no impediment, occupational balance was achieved. This may not have been a correct assumption given the complex nature of the phenomenon and, in retrospect, further investigation in the form of a follow-up question would have clarified the position.

Future research

The study has underlined the importance of pursuing existing questions for further research, namely how and why the factors that prevent the attainment of occupational balance have an impact on health and wellbeing. The question of what mechanisms might be in operation is an intriguing one. It is speculated that individual coping strategies, mind-body interactions and the stress response are key factors.

Conclusion

In this study, the students gained an awareness of the factors that affect occupational balance. They also began the process of self-reflection, enabling them to consider occupational choices for themselves and their future clients. The study has raised important questions about the connection between occupational balance and health and has demonstrated a research technique as a means of gaining evidence to support practice.

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