



UNIVERSITEIT VAN PRETORIA  
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## Faculty of Health Sciences

Fakulteit Gesondheidswetenskappe  
Lefapha la Disaense tša Maphelo

# Rethinking our undergraduate rehabilitation curriculum

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Theme: Education and Research

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# Presentation topics

- **Research context**
- **Overview of the research**
- **Theoretical constructs**
- **Some results**
- **Closing thoughts**



# Research context

- South African OTs have always been involved in voc rehab service delivery
- Facilitated by various South African policies and Acts - the Constitution, LRA, EEA, INDS and others
- HPCSA and WFOT guidelines
- My experience in terms of UG and PG voc rehab
- No curriculum guidelines in voc rehab

# Research question and aim

What is the core undergraduate curriculum in vocational rehabilitation for South African occupational therapists?

To develop the core UG curriculum in vocational rehabilitation for SA OTs

# Curriculum

- ***“An articulation of a framework of beliefs and knowledge that enables us to explain educational ideas” (McIntosh, Gidman, Mason-Whitehead, 2011 p40).***
- ***“More than just a syllabus or a statement of content – what should happen in teaching” (Dent & Harden, 2009 p10).***



# Curriculum

1. Content
  2. Teaching and learning strategies
  3. Assessment and evaluation processes
- Prideaux, 2003*

1. Education strategies
2. Content
3. Learning outcomes
4. Educational experiences
5. Assessment
6. Educational environment
7. Learning cycle
8. Time table
9. Work program

*Harden, 1995*

# Co-existing curriculums

- Planned curriculum – declared, documented
- Delivered curriculum - taught, what happens
- Experienced curriculum - by students – learnt
- Hidden curriculum – informal learning, values

*Prideaux 2003; Harden, 1995; Dent & Harden, 2009*

# Core curriculum

Not adequately clarified:

- Essential aspects of discipline, essential competencies, relevant areas of study (*Harden & Davis 1995, Swanick, 2011*)
- Provides essential knowledge, understanding, clinical skills & professional attitudes (*Dent & Harden, 2009*)



# Methodology

## Explanatory sequential design

*(Creswell & Plano Clark, 2011)*

### Two phases

1. Discovery of the current curriculum
2. Development of the core curriculum

## Discovery of the current curriculum

1. **Planned curriculum** – *document analysis, interviews*
2. **Delivered curriculum** – *interviews*
3. **Experienced curriculum** – *focus groups / interviews*
4. **Prof competencies** – *conceptual matching*

## Development of the core curriculum

5. **Generate the core UG voc rehab curriculum** - *Delphi*

# In the process, the research landscape developed some “*steep inclines*”

- Student protests during 2015
- One of the key demands articulated “*that curriculum transformation should be accelerated and intensified..... curriculum transformation has been a constant refrain in HE since apartheid collapsed*” (Prof Norman Duncan, 2016)

# Planned and delivered curriculum

- Process of consent
- Site visits – research context
- Developed interview schedule – core questions, clarifying and elaborative probes (*Creswell, 2014*)
- Piloted planned and delivered interviews using input from researchers, educationalists, clinicians, lecturers
- Conducted 2 on site interviews with each lecturer
- Descriptive and reflective field notes, reflexive journal



# Blended voice of OT lecturers

- Conversations with colleagues
- Mindful of their contexts and identity
- Preliminary exploratory analysis (*Creswell, 2014*)
- Some early emerging themes

# Terminology use

- Vocational rehabilitation
- Work
- Work potential
- Work practice
- Work preparation
- Work rehabilitation



# Purpose / outcome addresses

- Restoration of functional status and RTW
- Basic understanding of voc rehab
- Developmental aspect of work
- Addresses contextually relevant knowledge and skill
- Able to practice in a variety of settings
- Work with different diagnostic groups
- Common understanding of the occupational needs of society and the individual



# Positioning of VR curriculum

- Theory mostly in either 2<sup>nd</sup> , 3<sup>rd</sup> or 4<sup>th</sup> year – spiral curriculum not really evident
- Fieldwork either dedicated or integrated in either community, physical or psyche blocks between 3<sup>rd</sup> and 4<sup>th</sup> year
- Part of OT or OS or other unique academic modules





# Curriculum development

- Aligned with institutional vision & mission
- Aligned with departmental vision & mission
- Aligned with HPCSA minimum standards
- NQF requirements
- Personal experience
- Student feedback - ongoing
- Clinical supervisors input – initial and ongoing



# Curriculum development

- Informed by literature – national & international
- Having experienced the voc rehab curriculum
- Human rights focus
- Legislative developments
- Unique institutional context
- South African context
- Stakeholder input – including community, business, fieldwork areas



# Strengths - P & D curriculums

- Builds on prior knowledge
- Integrated curriculum
- Aligned to OT process
- Variety of fieldwork/context exposure settings
- OT program support
- Develops graduates ready to work in voc rehab
- Deals with injustices of the past



# Strengths - P & D curriculums

- Availability of resources such as standardized tests
- Use of a variety of T & L strategies
- Availability of E-learning platforms
- Good relationships with clinicians
- Passion and expertise of the lecturer
- Dedicated staff – IT, librarian, transport, admin



# Limitations - P & D curriculums

- Distance from theory to practice
- Stakeholders do not always buy in
- Limited time to plan and/or deliver
- Limited voc rehab staff – lecturer often the only person in dep
- Insufficient fieldwork time
- Limited space for training
- Changing nature of students

# Limitations - P & D curriculums

- Availability of OT clinicians in voc rehab settings
- Large student classes
- Lecturer has other responsibilities affecting time
- Limited access to resources such as testing equipment
- E-learning platforms use not always optimal

# Hidden curriculum

- Community awareness
- Contextual awareness
- Professionalism
- Respect
- Clinical reasoning
- To be present / engage



# Hidden curriculum

- Instil a sense of the value of work – important OPA
- To “*do as part of normal*” – not specialised
- Ethical practice
- Develop a voice within the team
- Contribution to society
- Safe practice



# Student profile

- Have little real life experiences
- Do not read literature
- Different learning styles
- Assertive and confident
- Changing as a result of institutional transformation policies

# Personal resources of lecturer

- No time – many responsibilities
- Rely on own experience
- Networking – friends, institutional colleagues
- Reading – staying up to date
- Input from clinicians
- Valued interest groups

# In closing

- Research journey is continuing
- Working on a common understanding of the “*core curriculum*” as a concept
- The experienced curriculum narrative needs to be discovered
- Having discovered the curriculum - do the winds of education transformation need to gust around it and re-shape it?

Thank you - in humbleness and with sincere appreciation, for the voices of the voc rehab academics (participants)

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