Context *interferes* with practice? **Reflections of a Clinical Educator**

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Rationale

- Concern for students well-being, their learning and development

- Interest in Critical Occupational Therapy (Hammel & Iwama, 2012)

Overview of the literature

- Critical occupational therapy (Hammel & Iwama, 2012)

- South African Health Review (1999)– individual vs population focus

Percentage of OTs in public sector = 19.5%	Percentage of OTs in private sector = 80.5%
34 million service users	7 million service users

- Call for OT to address social inequalities in communities that restricts occupational engagement (Sakelleriou & Pollard, 2012)

- What is Community development practice (Leclair, 2010) and various models of community development (De Jongh, 2009; Galvaan & Peters, 2014)

- Limited literature on the implementation of occupation-focussed community development models of practice

Research question

What are the tensions that a Clinical Educator confronts in supervising Occupational Therapy students practicing community development ?

Method

- Autobiographical self study (Bullough & Pinnegar, 2001)

- Data collection: Journal, comments in student logs and voice recorded reflections

- Thematic analysis

- No ethics approval required

- Process of self development as a CE and better understanding of my practice with students

Theme 1: Building Resilience for Practice

- Toughen the students up or allow them to adjust to the realities of practicing in a context of poverty and inequality

  "It must have been overwhelming to sit in that emergency room and realising how difficult and traumatising it actually is to access healthcare for the majority of South Africans."

- *Shared* emotion with community members

  "They also share in the disappointments though. They are visibly depressed and can't even manage to speak sometimes during supervision. They feel the same anger and frustrations that their group experiences…"

- How being authentic with clients affected their practice

  "The burden of success or failure of interventions is shared between themselves and the community. They quite enjoy being in background and have found their new 'background position' to be equally satisfying as being the professional responsible for successful treatment."

Theme 2: New understandings of personal and professional

- Partnering approach and connecting to clients as people

  "Of course you should share! You are human before a professional and it is quite appropriate to share human things with other humans. The clients are your fellow citizens- they too have green ID books and they are South African just like you."

- Students experience change on a personal level – became conscious citizens

  "In all their learners logs, they have shared how this block has shaped them not only as OTs but as South African citizens...They have become more self-aware, sensitive and reflective. Some students have mentioned how it has become difficult to now be part of conversations about poverty, etc. as people don't share the same understanding as they do."

- Being authentic - no need to put on a performance

  "Sharing with people that you don't know the answer can also be good"

- Personal safety – trust in the community

  "So often students have been 'recalled' from walking on foot in communities which affects their ability to engage with community members and discovers invaluable contextual information. Young professionals are made aware of these factors very early in their practice. Fear is so difficult to 'manage' when practicing. You want to help people but you constantly have to weigh up your safety vs patient needs."

- Balance in terms of slow process orientated vs academic expectations

> *"I recognised that the academic requirements were non-negotiable and that I needed to make sure that students are given opportunities to apply methodologies in practice. I also recognised that the community was not always ready for a particular methodology or space. ...Being flexible, compromising, having numerous back-up Plans and negotiating various obstacles is an important set of skills that students had come to develop. Letting students know that I understood if things didn't go according to plan and that this is the nature of working in domains that are dynamic and real."*

- Navigating the unknown but remain passionate and confident

"In South Africa Occupational Therapy is understood to be clinical and clearly positioned in either health or education. Community is normally regarded to be territory of the Social Work profession. It was challenging to navigate the unknown but remain confident and passionate in the face of inquiry."

What does this mean?

- Context shapes practice

- Resilience for practicing in SA contexts

- Critical OT allows us to address the realities that people face in contexts

- We need to develop an appreciation of occupational engagement on both an individual and community level

- Shift our perspective on the role of OT and our view of ourselves as professionals

- New understanding of authentic relationships with clients

Questions for us to think about…

- How do we support students in developing resilience while working in our South African contexts?

- *How* do we incorporate our knowledge of the contextual factors in our clients' communities (beyond the home environment) into our goals for therapy in all fields of practice?

- Should we develop a new understanding of what it means to be professional and how to be authentic in order to bring about change?

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