OTD Curriculum Design

Entry-level education must be accountable for adhering to guidelines set forth in the American Occupational Therapy Association, Inc. (AOTA), document Standards for an Accredited Educational Program for the Occupational Therapist, revised... The Accreditation Council for Occupational Therapy Education (ACOTE) monitors compliance with these Standards. The depth and breadth of the curriculum is designed to develop the knowledge, skills, and attitudes required of a generalist occupational therapist with a strong foundation in occupation-based practice. In addition, the doctorally prepared practitioner has also demonstrated the ability to synthesize advanced knowledge in a practice area through completion of the experiential component. Students are educated in the use of occupation to provide therapeutic intervention for individuals and groups of all ages through in-depth exploration of evidence-based literature.

The scope of Belmont's OTD program covers the spectrum of entry-level practice competencies in both physical and mental health settings. Throughout the curriculum students are introduced to the role responsibilities of a direct care provider, supervisor, consultant, educator, manager, leader, researcher, and advocate. The student is exposed to these roles through didactic coursework and participation in an expansive Level I fieldwork experience. Students also participate in learning experiences through classroom, laboratory, service, fieldwork, and the experiential component in which they are expected to function as change-agents and advocates for both the profession and individuals who may benefit from occupational therapy services. The educational outcome is a competent entry-level occupational therapist that is dynamically engaged in the profession and uses clinical reasoning to determine and implement best practice to enable performance in occupations.

Ralph Tyler's (1949) traditional model of curriculum design is an objective-oriented approach to education. In this model, the program planner states objectives, selects learning activities, organizes learning activities, and develops means of evaluation. The OTD program ensures that students meet the Standards by setting objective criteria, identifying learning experiences, and establishing methods of evaluation. This approach is consistent with an outcome-oriented view of education. The Standards, however, do not dictate what should be emphasized in a given curriculum or how the curriculum should be delivered.

In line with the University's mission, a socio-cultural view of education is reflected in the curriculum design which emphasizes the importance of learning about the human condition and one another through dialogue (classroom and web-based discussion) as well as through immersion in the community (service, level I and Level II fieldwork and the experiential component). To help our students mature into people who can 'engage and transform the world with disciplined intelligence, compassion, courage and faith,' we need to give them the opportunity to take risks, to find out community needs and current systems addressing those needs, and to explore ways of improving community life. A constructivist learning approach, in which students are challenged to build upon and challenge pre-existing knowledge and views, is also inherent in the curriculum design. The OTD curriculum design
reflects consideration of not only educational objectives, but goals and previous experiences of the learner as well as growth needed to transition to the role of occupational therapist, in relation to the learning context, and demands of the learning task. In addition, the content that is included in the curriculum includes not only objectives as identified by the Standards, but learning experiences and a philosophy of learning that are conducive to achieving the Belmont University vision and mission and the mission and vision of the OTD program.

Caffarella (2002) states that five broad purposes of education are “to encourage growth, to assist with practical problems, to prepare people for current and future opportunities, to assist with change for desired results, and to examine community or social issues” (p. 10). She also states that program planning must consider contextual factors that influence the program including the social, economic, cultural, and political climate. An educational program must meet local and regional needs. Belmont's vision statement puts service at the heart of a Belmont education. Our campus sits at the intersection of several culturally-diverse neighborhoods: 12th South, Hillsboro Village, Edgehill, and Waverly-Belmont. Our city is a home to refugees, immigrants, disadvantaged families and schoolchildren. As we, as a university, seek to be a meaningful community institution, we need for our students to participate in that community. This participation can ensure our students learn the needs, challenges, and opportunities of working in settings with people from diverse backgrounds. Based on these needs, Belmont's OTD program prepares students to be cognizant of the potential need for occupational therapy services in traditional and non-traditional roles in their local community.

AOTA's Centennial Vision (2006) states "We envision that occupational therapy is a powerful, widely recognized, science-driven and evidence-based profession with a globally connected and diverse workforce meeting society's occupational needs." The Centennial Vision goes on to identify four strategic directions to fulfill the profession’s vision. The first strategy states: “Building the capacity to fulfill the profession’s potential and mission specifically includes "strengthen(ing) our capacity to influence and lead"(AOTA, 2007, p. 613). According to Clark,

… To be and become powerful, occupational therapy practitioners will need to hold leadership roles in health care delivery systems, to be active in policymaking, and to utilize technology to provide services. The source of this power is a strong educational foundation, which will equip practitioners to influence change to benefit society. American Occupational Therapy Association (2006) AOTA’s centennial vision http://www.aota.org/nonmembers/area16/docs/vision.pdf

The ACOTE Standards stipulate that the doctorally prepared entry-level occupational therapist will specifically be prepared for the role of leader. The Preamble to the ACOTE Standards for the Doctoral Degree Level Educational program goes on to specify that the graduate will demonstrate thorough knowledge of evidence-based practice and demonstrate active involvement in professional development, advocacy, and leadership. Given this, Belmont University's Doctorate of Occupational Therapy Program has incorporated the principles of the Social Change Model of Leadership Development into its curriculum.
Established in 1994, the Social Change Model (Komives & Wagner, 2009) approaches leadership as a purposeful, collaborative, values-based process that results in positive social change. The Model was built upon the following assumptions:

- “Leadership” is concerned with effecting change on behalf of others and society
- Leadership is collaborative
- Leadership is a process rather than a position
- Leadership should be value-based
- All students (not just those that hold formal leadership positions) are potential leaders
- Service is a powerful vehicle for developing students' leadership skills

The Ultimate goal of Social Change Model is change. Change gives meaning and purpose to the seven Core Values (7 C's). Change means improving the status quo, creating a better world and demonstrating comfort with transition and ambiguity in the process of change. This is consistent with Occupational therapy's belief that participation (involvement in life situations) naturally occurs when clients are actively involved in carrying out occupations they find purposeful and meaningful. The model encourages highly participatory, non-hierarchical leadership.

The specific goals of the model (as adapted) are:

- To enhance student learning and development.
- To develop in each student participant greater:
  - Self-knowledge
  - Leadership competence
- To facilitate positive social change in the community by undertaking actions which will help all people increase their ability to participate in their chosen occupations.

The model identifies seven Core Values (7 C's) of Leadership development which are grouped by the values of the individual, group, and the community/society which correspond to the OTPF III (AOTA, 2014) definition of client – persons, groups, and populations. These three clusters of values interact with each other to promote social change. "Each cluster is inextricably tied to the others. Learning and development at the individual level helps facilitate the leadership process at the group level. Likewise participation in collaborative group processes provides experience and feedback that enhances a person's development at the individual level. These "feedback loops" exist among all three levels of the model" (Wagner, 2006, p. 9).

Individual Values: (persons)

C1 - Consciousness of Self – Requires an awareness of personal beliefs, values, attitudes, and emotions. Self-awareness, conscious mindfulness, introspection, and continual personal reflection are foundational elements of the leadership process. Being aware of the beliefs, values, attitudes, and emotions that motivate one to take action is key to being able to
develop consciousness of others. This value is consistent with language found in the OTPF III –Values, beliefs, and spirituality influence a person's motivation to engage in occupations and give his or her life meaning. Only clients can identify the occupations that give meaning to their lives and select the goals and priorities that are important to them" (AOTA, 2014)

C2 - Congruence – Requires that one has identified personal values, beliefs, attitudes, and emotions and acts consistently with those values, beliefs, attitudes and emotions. A congruent individual is genuine and honest and "walks the talk". It requires understanding and being consistent with one's own values, beliefs, strengths, and limitations and is interdependent with consciousness of self. The OTPF III recognizes that a person's values affect performance – "Engagement and participation in occupation take place within the social and physical environment situated within context. Context refers to elements within and surrounding a client that exert a strong influence on performance. The cultural context includes customs, beliefs, activity patterns, behavioral standards, and expectations accepted by the society of which a client is a member. The cultural context influences the client's identity and activity choices." The Bible shares this sentiment in James 2:14 (Revised Standard Version) "What does it profit, my brethren, if a man says he has faith but has not works?" and in James 2: 18 "But someone will say, "You have faith and I have works." Show me your faith apart from your works, and I by my works will show you my faith."

C3 - Commitment – Requires an intrinsic passion, energy, and purposeful investment toward action. This is consistent with occupational therapy's belief/philosophy that The human being is a holistic, dynamic person who is intrinsically motivated to engage in occupation (Hooper & Wood, 2014). Follow-through and willing involvement through commitment lead to positive social change and requires knowledge of self.

Group Values (groups)

C4 - Collaboration – Multiplies a group's effort through collective contributions, capitalizing on the diversity and strengths of the relationships, and interconnections of individuals involved in the change process. Collaboration assumes that a group is working towards a common purpose, with mutually beneficial goals, and serves to generate/create solutions as a result of group diversity, requiring participants to engage across difference and share authority, responsibility, and accountability for its success. In discussing Therapeutic Use of Self, the OTPF III states "Occupational therapy practitioners develop a collaborative relationship with clients to understand their experiences and desires for intervention. The collaborative approach used throughout the process honors the contributions of clients along with practitioners." Collaboration encourages the group to transcend individual goals, interests and behaviors. It is vital that group members explore differences in individual values, ideas, affiliations, visions, and identities. Leadership is viewed as a group process. This is reflected under the Occupational Profile section of the OTPF III "By valuing and
respecting clients' input, practitioners help foster their involvement and can more efficiently
guide interventions." Collaboration is also key to effectively communicating and working
interprofessionally with those who provide care for individuals and/or populations in order
to clarify each member's responsibility in executing components of the an intervention plan
(AOTA, 2011).

C5 - Common Purpose – necessitates and contributes to a high level of group trust involving
all participants in shared responsibility towards collective aims, values, and vision. It is best
achieved when all members of the group share in the vision and participate actively in
articulating the purpose and goals of the activity This sentiment is also reflected in the
literature on Interprofessional education which believes that IPE results in better client
outcomes. IPE has been identified as a mechanism to achieve improved communication,
trust and collaboration. This "C" is also consistent with language regarding Therapeutic Use
of Self in the OTPF III "Practitioners and clients, together with caregivers, family members,
community members, and other stakeholders… identify and prioritize the focus of the
intervention process." Under Analysis of occupational performance the OTPF III states –
"(We create) goals in collaboration with the client that address the desired outcomes."

C6 - Controversy with Civility – In order for a group to work toward positive social
change, open, critical, and civil discourse can lead to new, creative solutions and is an
integral component of the leadership process. Multiple perspectives need to be understood,
integrated, and bring value to a group. Conflicts need to be resolved but also integrated
into the common purpose. The American Occupational Therapy Association (AOTA)
Occupational Therapy Code of Ethics and Ethics Standards (2010) (Code and Ethics
Standards) encourages practitioners to “Use conflict resolution and/or alternative dispute
resolution resources to resolve organizational and interpersonal conflicts" (AOTA, 2010, p.
10).

Societal/Community Values

C7 - Citizenship – occurs when one becomes responsibly connected to the
community/society in which one resides by actively working toward change to benefit others
through care, service, social responsibility, and community involvement. The practice of
good citizenship should and needs to happen at every level of the model. This is reflected in
the section on Occupational Justice in the OTPF III which states "Occupational justice
recognizes occupational rights to inclusive participation in everyday occupations for all
persons in society, regardless of age, ability, gender, social class or other differences."
Similarly, the Bible implores us in Proverbs 31: 8-9 to "Open your mouth for the dumb, for
the rights of all who are left desolate. Open your mouth, judge righteously; maintain the
rights of the poor and needy."