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A leap out of character: an autoethnography of the influence of international immersion experiences on an occupational therapy student's professional development

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A LEAP OUT OF CHARACTER:
AN AUTOETHNOGRAPHY OF THE INFLUENCE OF
INTERNATIONAL IMMERSION EXPERIENCES ON AN OCCUPATIONAL
THERAPY STUDENT’S PROFESSIONAL DEVELOPMENT

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ABSTRACT

As students in professional academic programs are socialized to the profession they refine their professional construct. Using an autoethnographic method, I describe the changes in my professional construct through participation in two international immersion experiences. I analyze how specific experiences contributed to changes in my professional construct. The mechanisms for professional socialization include interacting with professors and professional occupational therapists, personal reflection, interacting with others in a culture different from my own, and experiencing uncertainty and vulnerability. Examining how these experiences shaped my professional construct may inform future initiatives to socialize future occupational therapists to the profession.
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Introduction

I sat facing twenty-five teachers and staff that I had spent the last month working with while volunteering at a school in Jaipur, India. Although no one was speaking, the room was loud with the sound of whirling ceiling fans. All eyes were on me and my four classmates, and I hesitated briefly to summon the strength I would need for my typically quiet voice to be heard over the fans. I stood up and thanked everyone there for their hospitality, kindness, and for taking the time to teach the five of us, occupational therapy students from the United States, about working with their students and living in India. When I sat down, I was surprised at how quickly and easily I spoke to the full room. I guessed that three months ago, before participating in two international immersion experiences, I would have waited for someone else to speak first. However, I had decided that I wanted to take a leap away from my comfort zones in the United States by participating in these international experiences, and I found that this leap resulted in various out-of-character behaviors. I had grown and changed, developing a deeper personal awareness and a greater understanding of occupational therapy. One way that students in professional academic programs learn and change is through the process of socialization. One definition for socialization can be found in documents of the American Occupational Therapy Association (AOTA) as “the process by which students are inculcated to the knowledge, skills, culture, and ethos of occupational therapy; building professional identity (AOTA, 2014b, p. S84). In this paper, I discuss how my participation in two international immersion programs influenced my socialization process as an occupational therapy student.
Between the first and second years of the academic curriculum in an occupational therapy professional entry-level graduate program, I participated in two international immersion experiences. In the summer of 2014, over a total of six weeks collectively, I spent two weeks in Quito, Ecuador and four weeks in Jaipur, India. Each experience was arranged by faculty at Boston University designed to provide enrichment experiences for occupational therapy students to compliment the academic curriculum. In Ecuador, I traveled with seventeen students, six from my occupational therapy program and eleven from another occupational therapy program in the United States, along with two occupational therapy professors and three professional occupational therapists who were trained and practiced in the United States. In India, I traveled with four students from my occupational therapy program and we communicated at least once a week with our professor in the United States via email and video chats. Both programs emphasized learning through hands-on experiences and volunteering. I chose to participate in these programs primarily because I was interested in opportunities to grow both academically and personally in preparation for becoming an occupational therapist. Academically, I was excited about the possibility of combining my previous undergraduate background in anthropology with my evolving knowledge and experience in occupational therapy. Personally, I hoped to develop certain characteristics that I felt would help me to become a confident occupational therapist. Previous experiences in my life had taught me that sometimes big leaps are required to learn about different aspects of myself and learn how I react to unfamiliar situations. I hoped that these summer experiences would provide a beneficial leap.
After completing the first year of the occupational therapy professional curriculum at Boston University, I had begun to be socialized into the profession of occupational therapy through class readings, assignments, discussions, and observing other occupational therapists. Tryssenaar (1999) defined professional socialization as the process of factors external to an individual, such as culture and expectations of an institution and situations that an individual experiences, facilitating professional development. She contrasted professional socialization with professional construct, a term that Hollis and Clark (1993) coined to refer to an individual’s development of awareness. Tryssenaar defined professional construct as an occupational therapist’s “understanding of the world as [a] professional” (p. 107), and Hollis and Clark stated that it encompasses one’s professional role identity, awareness of scope and depth of one’s work, confidence in one’s role, relationship with others, and ability to respond effectively to professional challenges. The development of professional construct is an internal and individual process that occurs when a student or practitioner interacts with a profession and interprets and learns from experiences. I have used the term professional construct throughout this paper to reflect on how my international immersion experiences have contributed to my professional development. Before my international immersion experiences, I had many opportunities to reflect on my developing professional construct. This development began with the application process for entry into an occupational therapy professional educational program, and continued through class readings, assignments, discussions, and fieldwork observations. The following description of my professional construct before participating in the international immersion experiences
was compiled from excerpts from my application to Boston University and assignments
during the first year of the curriculum:

I believe that all people deserve to live a life that they enjoy and I believe that we
each have a responsibility to help others. Occupational therapy is the best fit for me to do this. I enjoy working with others and have experienced first-hand the
value of meaningful work that allows people to feel useful and productive.
Occupational therapists help people to do activities that are meaningful to them
and contribute to their well-being and community participation. My current
knowledge and perspectives are informed by prior experiences of working with
others and by an undergraduate education in anthropology. Occupational
therapists consider the impact of environment and context on an individual’s experience. As part of context, occupational therapists also work towards
occupational justice. Being an occupational therapist requires being a leader in
different situations, including listening to others, initiating action, encouraging
others, and being courageous. I have both strengths and weaknesses as an
occupational therapy student. My diversity of previous experience prepares me to
work in a variety of settings with diverse clients. My patience, strong listening
skills, and empathy are also strengths when working with clients. I feel less
confident in my ability to be assertive and to participate and be heard in different
settings and situations. I am able to form positive relationships with peers,
coworkers, and clients that are honest and respectful. I currently feel
apprehensive and not fully prepared to approach my first job confidently and competently.

After returning from my second international immersion experience, I reflected on my professional construct again, and recorded the following statements:

I feel a strong obligation and commitment to helping others when and how I am able to. I value holistic approaches to problems, including considering the importance of environment and context in shaping individuals’ experiences. I strive to use a perspective that recognizes that many categories and assumptions are culturally constructed. I am more aware of how occupational therapists work with clients’ bodies, and I recognize that it is important for occupational therapists to understand the musculoskeletal system. I recognize that occupational therapy is practiced differently in different countries. I feel more confident, overall, and more independent and capable. I am more confident that I will become comfortable working hands-on with clients, but more apprehensive about my current comfort and ability with this. I feel more connected to my classmates, professionals, and other occupational therapy students at other schools. I am excited to be a part of the wider community of occupational therapy practitioners. I feel comfortable working with children and feel able to come up with ideas to work with them and keep them engaged and on-task when alone with a child. I feel more comfortable advocating for myself in different situations.

After my international immersion experiences, several changes occurred in my professional construct. In this paper, in order to examine the impact of international
immersion experiences on an occupational therapy student’s socialization to the profession of occupational therapy, I explore the ways in which specific experiences while abroad promoted personal growth and influenced changes in my professional construct.

In this paper, I address a question proposed by the AOTA research agenda for occupational therapy education: what are optimal effective mechanisms for professional socialization of occupational therapy students (AOTA, 2014b). This research agenda document defines socialization as the process of building professional identity. However, in this paper I expand this definition to explore other concepts of professional construct.

Occupational therapy education aims to facilitate students’ acquisition of specific skills, knowledge, and values in order to communicate effectively with clients with diverse life experiences and cultural backgrounds. The Accreditation Council for Occupational Therapy Education (ACOTE) Standards (effective July 31, 2013) are a guide for occupational therapy academic programs, and provide insight into the values of the profession and important competencies students should acquire. The ACOTE Standards state that graduates must have knowledge about the field and practice of occupational therapy. Graduates must also “uphold the ethical standards, values, and attitudes of the occupational therapy profession.” (AOTA, 2011, S7). The development of a student’s professional construct involves the learning and internalization of the skills, knowledge, and values of the occupational therapy profession. There are many possible ways that students can develop their professional construct throughout their education. In part, I developed my professional construct through a process of socialization while
participating in international immersion experiences. Examining how these experiences shaped my professional construct may inform future initiatives to socialize future occupational therapists to the profession.

**Methodology**

Each student’s response to various educational approaches and his or her process of socialization is highly personal and individual. The method of autoethnography assumes that the self is a “carrier of culture, intimately connected to others in society” (Chang, 2008, p. 125). An autoethnographic method uses the self as a “lens to look through to gain an understanding of a societal culture” (Chang, 2008, p. 49), and personal narrative is used to analyze or interpret a culture. In this reflection of my socialization to the profession of occupational therapy, I am particularly interested in my interactions with the culture of occupational therapy. Using autoethnography, I am able to closely analyze my own experience in a way that provides insight into what specific experiences influenced my professional construct and promoted deeper personal reflection and growth, examining both my personal responses and external factors that influenced my experience.

**Data collection**

I wrote ethnographic fieldnotes during my international immersion experiences, beginning prior to arriving in Ecuador, and continuing after returning to the United States from India. I collected self-observational data about the behaviors, thoughts, and emotions that occurred during my time in these two countries. I also wrote reflections on my self-identity, personal values and preferences, and relationships with others. Before,
during, and after my experiences in Ecuador and India, I wrote notes about the events of the day, my reactions, my thoughts, and my feelings. In Ecuador, some of these notes were guided by specific reflection questions assigned by my professor (see Appendix for sample questions). These reflection questions were created with the intention of bringing students to a deep reflection of their experiences (Gilbertson & Cohn, 2013). Following personal reflection, these questions were also processed in a large group with students, professors, and professionals. For example, before arriving in Ecuador I was asked to reflect on my own cultural background and expectations for the experience. While in Ecuador, I was assigned to write self-directed reflections on my experiences observing and volunteering at a clinic for children with cerebral palsy. I made similar self-directed reflections in India. Additional data includes documents that describe the purpose and objectives of each program that I received prior to applying to the programs and emails I wrote during my international experiences.

**Data analysis and interpretation**

To analyze the data, I began by reviewing the entire data set and labeling and classifying the data. Specifically, I examined the data for indicators of how my experiences were examples of professional socialization and influenced my professional construct. I also compared reflections about my professional construct before and after my international experiences. I searched for recurring themes and reviewed the data to identify instances of emotional occurrences. Ellis (1991) argued that exploring personal emotions allows researchers to examine their individual processing of the meaning of events as well as how these personal meanings are influenced by sociocultural norms. In
this way, emotions can reveal an individual’s relationship to a broader social or cultural context. Examples of emotional occurrences during my international immersion experiences included times when I witnessed something that made me feel sad, when I was engaged in an activity that made me feel uncomfortable or vulnerable, or when I became aware of a discrepancy between the way I was acting and the type of therapist I hope to become. Identifying emotional occurrences helped me choose what experiences to examine more thoroughly because these moments of strong emotional reactions may be important indicators that I was learning about myself or about how I view my environment, or may reveal my feelings about specific norms of the occupational therapy profession. I also identified instances that are related to changes in my professional construct before and after my experiences. I interpreted the data by searching for connections between the wider topic of professional socialization by framing the data with broader theories of professional socialization (Hollis & Clark, 1993; Sabari, 1985; Spencer, 1986; Tryssenaar, 1999), theories of inter- and intra-personal skills in occupational therapy (Schell, 2008; Taylor, 2014), and the knowledge and values of occupational therapy (Chang, 2008).

**Ethical considerations**

I consulted with the IRB at Boston University, and they concluded that an IRB review was not necessary for this study because it is a case-study that does not involve interviewing, testing, evaluation, or intervention. However, researchers have discussed the lack of clear or consistent ethical guidelines for autoethnographies. Tolich (2010) conducted a review of how several published autoethnographies addressed the value of
obtaining informed consent from those whose identities might be revealed in the ethnography. Based on this review, he suggested ten guidelines to ensure ethical research: respect and document participant’s autonomy and voluntary nature of their participation, practice process consent by checking with participants if they still want to be involved at each stage of the project, recognize the conflict of interest or coercive influence when seeking consent after the ethnography is written, consult with an IRB, not publish anything that you would not show the person mentioned in the text, be aware of internal confidentiality between participants, anticipate the author’s future vulnerability, take steps to minimize harm, use a pen name if minimizing harm is not possible, and assume that every person mentioned in the text will read it. I followed Tolich’s guidelines as closely as possible and changed or omitted names and identifying information from my accounts.

**Experiences that shaped my professional construct**

Numerous researchers have documented the benefits of international immersion experiences, noting that through such experiences, students have experienced personal, professional, and spiritual growth (Domina & Doll, 2013), learned about different cultures, about communicating with others, and about themselves (Humbert, Burket, Deveney, & Kennedy, 2012; Barrett, unpublished). I experienced many of these benefits through my participation in two international immersion programs. Many of my experiences also contributed to changes in my professional construct. The following stories provide examples of how specific experiences impacted my professional construct.
Interacting with children with disabilities

After spending three days at a day program for children with cerebral palsy in Ecuador, I felt overwhelmed and confused about what I should be doing while interacting with the children. Most of the children did not speak and their active physical movements were limited. Although I could not understand much of what the physical therapist at the program said due to language differences, I tried to follow what he indicated I should do. I spent most of my time during the first three days massaging the children’s muscles and attempting to move their limbs through range of motion exercises. However, I felt awkward and uncomfortable, and as though I was not handling the children correctly or interacting with them in a beneficial manner. On the fourth day, my professor from the United States, who had a lot of experience working with children, visited the site and showed me techniques such as positioning my body in a way that could support the children in an upright position, slowly rocking the children to encourage their muscles to relax, and engaging them socially. That weekend, as a group of students, professors, and professionals, we further discussed touching clients in a way that is beneficial and therapeutic and practiced positioning and movement techniques on each other. During the following week, I continued to practice these techniques on the children at the day program and learned a lot by feeling and observing how the children responded to different positioning techniques.

In both Ecuador and India, I was asked many questions by other professionals that I was expected to know as an occupational therapy student. Various therapists responded with surprise or confusion when I said that I did not know the answer to questions such as
“what is tone?” “how do you perform manual muscle testing?” or “what sensory strategies can you use to help a child who has difficulty with motor tasks?” Hearing these questions and the therapist’s answers provided me with a better understanding of what others expect occupational therapists to know.

**Vulnerability and miscommunication**

When responding to novel situations, I became aware of my strengths and weaknesses. During the weekend following my first week in India, my classmates and I, all occupational therapy students, took a taxi to Agra to see the Taj Mahal and other nearby sites. Our taxi driver was a friend of a staff member at the school where we were volunteering. He did not speak English and we did not speak Hindi, his language. On the drive back from Agra to Jaipur, we left a few hours before sunset for what was supposed to be a four-hour drive. While on the highway about half way between Agra and Jaipur, the driver started to pull the van to the side of the road, and then the engine died. With several attempts, he was unable to restart the engine. He got out of the van and began walking toward several road-side food stalls. Since we did not speak the same language as the driver, we did not know what had happened to the van or how long we might have to wait before we would start driving again. The sun was beginning to set, and after waiting about 20 minutes, I walked with another student to the food stalls and bought several snacks to share with the other students. We all expressed that we were uncomfortable being left by ourselves on the side of the highway and felt scared and vulnerable as it became dark. I found myself taking a leadership role at this time. The driver came back with another man and they opened the hood of the van and began to
work on the engine. We continued to sit in the van for about three hours while many
other men came over to the van. One man spoke some English and had a cell phone that
one of my classmates asked to borrow. I offered to call the staff at the school where we
were volunteering who had helped us set up the taxi ride. The cell reception was very
spotty, causing static on the phone and making the staff on the phone difficult to hear
clearly. However, I was able to hear her say that she would call the cab company owner,
and that we should “stay in the van.” I took these words literally, concerned that we
would be unsafe if we did not stay in the van, and we continued to wait in the van for
another hour. During this time, other men came up to our windows to look in. Our
windows were opened slightly and when an auto rickshaw driver who appeared drunk
pressed his face against the window of our van, I loudly yelled, “no, no!” This was
uncharacteristic of me to yell out since I tend to have a quiet voice and typically wait for
others to speak or act before I do. While waiting in the van, I also comforted the other
students by telling them that it was highly unlikely anything bad would happen since
there were so many people around, even if they didn’t speak English. However, I also
wrote out all the phone numbers I had for anyone in India including the staff at the school,
the taxi owner, and the school on sheets of papers and handed them to the other students,
just in case we got separated. In this moment, my actions were a strength in getting help
and supporting my classmates, a strength that I did not know that I had.

During the last two weeks in India, miscommunication with staff members at the
school required that my classmates and I discuss our expectations for our time at the
school and advocate for ourselves to participate in specific opportunities. While sitting in
a staff member’s office, I was feeling frustrated because I had hoped to visit other
occupational therapists and health care sites in Jaipur that day, and it was challenging to
agree on a good time for these arrangements to take place. It appeared that other
classmates and staff members were also upset. Although I was nervous and my voice
shook slightly as I tried to think of what to say and remain calm in a challenging situation,
I was the first student to respond to the staff member’s questions and throughout the
meeting I advocated for my classmates and myself. After several conversations, we
agreed on a schedule for visiting other sites in Jaipur while also meeting the needs of the
school where we were volunteering.

**Feedback from a supervisor**

In Ecuador, at the end of the two-week program, I had an evaluation with the
professional occupational therapist from the United States who was my supervisor at the
day program for children with cerebral palsy. This evaluation was difficult and
emotional because I was not satisfied with my performance. I evaluated myself as
“unsatisfactory” in taking initiative and making an effort to communicate with those who
only speak Spanish. It was difficult to put on paper and to talk with a professional whom
I greatly respected that I hadn’t accomplished what I wanted to during my time in
Ecuador. She agreed with what I had to say about feeling overwhelmed, hesitant, and
uncomfortable, and offered suggestions for how I could behave in future settings. She
told me that when I don’t share my thoughts and ideas with others that I’m being unfair
to those around me and that I have a responsibility to share my ideas and thoughts with
others.
Uncertainty

Throughout my time in Ecuador, I often felt unsure about what I was doing. On my first day at the day program, I was working with children with cerebral palsy for the first time. While massaging the jaw and neck of a child with the speech and language pathologist (SLP), the SLP asked me if I was “scared to be working with these kids.” This question upset me and I fought back tears as I continued working with the child. I was feeling overwhelmed because I was not sure what the SLP wanted me to do and could not communicate with him in Spanish, I didn’t want to massage too hard and hurt the child, and I was upset that I was giving the impression that I did not like the children. Following this incident, I felt even less confident in my abilities.

During my first day volunteering at the school in India, I spent the morning observing a classroom of students ages 7–9 years. I was not given much instruction by the teacher who spoke only a little English. I felt uncomfortable just standing on the side of the room, and the previous day I had written in my journal that I decided that “I would just do what I thought was appropriate and I would be stopped if I was doing something I shouldn’t.” The teacher handed me some colored tiles in different shapes to work with one girl, indicating that I should ask the girl to pick up specific shapes that I say. After a few minutes of asking the girl to pick up specific shapes, it appeared that the girl was getting bored, and I started playing different games with her. I tried to do things that felt like occupational therapy. I tried to engage the student in any way I could imagine. I tried to encourage the student to use both hands to pick up the shapes, motivating her to hand me the shapes, and then putting the shapes on our heads in a playful manner. I felt a little
silly, but had a lot of fun with her, and she was laughing and engaged. That evening, I wrote in my journal that “I definitely feel like I would not have felt as comfortable doing my own thing with the kids without my experience in Ecuador.”

**Witnessing inequality and injustice**

I saw many things in Ecuador and India that made me sad and that made me keenly aware of inequality and injustice. The children at the day program in Ecuador did not have access to many resources and many of the children had not received therapy, resulting in painful skeletal abnormalities. The children at the school in India had access to therapy, medical intervention, and supplies in their school. During a morning assembly at the school in India when all the children came together for singing, exercises, and announcements, I reflected on the difference between the children in these two settings, and felt tears start to come to my eyes as I thought about how unfair it was that access to resources could make such a difference in children’s lives. Another moment in India that brought tears to my eyes was an encounter with a small girl begging for money in the Old City of Jaipur. Although there were many people in India begging for money, I had developed a habit of walking past them. However, this girl approached us at a stop light and as we waited for the light to change, she reached out and touched my arm. Then, when the light changed and I walked away, she pinched my arm.

My decision to become an occupational therapist was influenced by my desire to help other people. However, this desire was abstract, a broad sense that “we should all do what we can to help others.” This desire was shaped by how I was raised, including messages from family members that we should act with kindness and compassion and
never do anything that hurts other people. In many ways, my family has been my moral compass: if a family member believes something is hurtful or unkind, then it must truly be wrong. During my first week in India, I had several email correspondences with one family member in which he raised concerns and questions about some of the descriptions of what I was seeing in Ecuador and India and expressed that he felt saddened and burdened by how injustices in the world hurt children. I reflected on these correspondences throughout my time in India as I saw both things that upset me and things that made me happy. As I attempted to respond to questions raised by a family member I have always looked up to and to offer support and hope to a family member, I also felt that I needed to start to take greater responsibility in being my own moral compass and take greater responsibility for how I treat other people.

**Interacting with peers**

I frequently relied on my peers in Ecuador. Since I didn’t speak any Spanish, I had to rely on classmates to translate for me, read signs, and talk to people wherever we were. I was sick for several days with a stomach bug, and my classmates walked me back to my hostel and brought me food that I could eat. I was sick during a weekend trip when we visited a rural community in the mountains and stayed in community members’ homes. I stayed with a classmate who I knew well and who spoke Spanish well, and I relied on her to communicate how I was feeling and what I was able to eat. These experiences made me feel very connected with my peers in Ecuador.

My time in India began with a week of traveling with two other students before starting to volunteer at the school. From the beginning, I was aware that I had more
experience with India since I had been to the country several years before, and more experience traveling on my own. Throughout our experience in India, I often took a leadership role with my classmates, a role that is out of character for me. In addition to the situations described above, the taxi ride and when talking with staff members of the school, I spoke up and offered suggestions and solutions to problems more often than I usually do.

**Discussion**

My participation in two international immersion experiences was part of my socialization to the occupational therapy profession and contributed to the development of my professional construct. Through these experiences, I participated in cultures different from my own while interacting with occupational therapy professors, practitioners, and individuals with varying languages, backgrounds, and experiences. I reflected on my personal characteristics and values individually and with others. I also experienced unfamiliar settings in which I felt uncertain or vulnerable and had to make decisions while removed from typical supports that I depended on in the United States. The ways in which my international immersion experiences shaped my professional construct highlights important mechanisms for professional socialization of occupational therapy students. Although my experiences were unique to these specific international immersion programs, they included many features described in the literature as important in developing professional construct in the field of occupational therapy (Sabari, 1985; Schaber, 2014; Schell, 2008; Spencer, 1986; Taylor, 2014; Tryssenaar, 1999).

Highlighting the mechanisms that facilitated my professional socialization may provide
insights related to the AOTA research agenda for occupational therapy education focused on optimal mechanisms for professional socialization.

Schaber (2014) identified relational and affective learning in occupational therapy educational programs, ways of learning that align with the values of the profession. International immersion experiences are one example of a learning experience that promotes both relational and affective learning to shape occupational therapy students’ professional construct development and socialization to the profession of occupational therapy. Relational learning occurs as human connections are made during the learning process. Connections with faculty and experienced occupational therapy practitioners are also part of students’ socialization process as students internalize specific values, roles, and skills that enable them to function as members of the cultural group that is the occupational therapy profession (Sabari, 1985). Spencer (1986) and Tryssenaar (1999) discussed the importance of faculty members, fieldwork supervisors, and more experienced occupational therapists in shaping the professional construct of occupational therapy students and recently graduated practitioners. In Ecuador, I interacted with professors of occupational therapy academic programs and professional occupational therapists. When my professor visited the day program where I was volunteering and demonstrated ways to work with the children and during the discussion and practice that followed, I learned specific skills of occupational therapy. When I tried to practice similar skills with the children I worked with in India where I did not have the guidance of a professor or other occupational therapist in the moment, I used these skills and roles that I had internalized. My observations working with children in Ecuador provided me
with more ideas about how to engage children in meaningful and fun activities. Being exposed to a range of practitioners in different settings expanded my definition of occupational therapy, shaped how I behaved when interacting with clients and other professionals, and contributed to the development of my professional construct as I gained confidence in my role in different settings.

Throughout the two international immersion experiences, I used journal prompts assigned by professors (Gilbertson & Cohn, 2013), unprompted journal writing, and discussions with others to reflect on my experiences, observations, behavior, personal characteristics, expectations, goals, and values. Reflective journaling has been identified as a means for exploring values and feelings that helps students develop self-awareness (Hubbs & Brand, 2010). Reflection may also lead to transformative learning, the reassessing of an individual’s assumptions and beliefs that shape the way he or she perceives, understands, and feels about the world, and acting on insights from such reassessments (Mezirow, 1990). My reflection was also an example of affective learning, another type of learning that Schaber (2014) states is important for occupational therapy education. Affective learning occurs when learning transforms personal identity, attitudes, beliefs, and values.

Sabari (1985) noted that individual personal characteristics shape the ways in which students respond to experiences and influence the socialization process. I learned more about my personal characteristics and how these characteristics influenced my thoughts and behaviors in different situations during my international immersion experiences. I am often quiet and hesitant in many situations, and before these
international immersion experiences began, I hoped that the experiences would facilitate a big leap that would disrupt my quiet and hesitant pattern. Keeping in mind the goal to be more assertive and confident throughout both experiences, I often reflected on my interpersonal skills. At the end of my time in Ecuador, I felt disappointed and frustrated as I reflected on the ways in which my actions and characteristics did not align with those that I expected of an effective occupational therapist. Reflecting on these feelings with an experienced occupational therapist during a final evaluation allowed me to learn more about my strengths and weaknesses and motivated me to behave differently in India. Reflection and feedback on my personal characteristics including my interpersonal skills facilitated my learning about how these characteristics shaped my behavior and encouraged me to try to change my characteristics or behaviors in future situations.

Taylor (2014) argued that recognizing strengths and weaknesses in one’s personality is necessary in order to develop effective interpersonal skills. Interpersonal skills are fundamental to the practice of occupational therapy because they are necessary when engaging clients in the therapeutic process. Occupational therapy practice involves the therapeutic use of self, a therapist’s intentional use of his or her behaviors, personality, and emotions when interacting with clients to create an optimal therapeutic relationship (Taylor, 2014). I had to use my behaviors, personality, and emotions in a range of ways when interacting with people in Ecuador and India. When interacting with the children in Ecuador and India, I often did not speak the same language as the children, and I had to express myself in different ways. Frequently, I spoke in English, but varied my tone and used specific gestures to encourage the children to engage in various activities. At times,
I demonstrated or used hand-over-hand assistance to communicate. The ability of occupational therapy practitioners to vary their ways of interacting with individuals requires specific inter- and intra-personal skills such as assertiveness, taking initiative, and appearing confident when interacting with others (Taylor, 2014). During the taxi drive from Agra to Jaipur, I was assertive when telling people to move away from our taxi and when calling the school staff member to try to find a solution. These leadership and assertive behaviors were out of character for me, but, when confronted with the situation, I had no other option. Being stranded on the side of the road, without anyone else to rely on, provided a circumstance in which I had to leap out of character. Similarly, when speaking with staff members of the school, I felt that I had no other option and that no one else would speak for me. Schell (2008) stated that students can develop inter- and intra-personal skills through gradually strengthening communication skills over time. These communication skills are framed by a student’s values and worldview and are refined by reflecting on his or her development, being open to the perspectives of others, and being willing to change behaviors based on feedback.

Reflection also allowed me to make connections between my personal values and those of the profession of occupational therapy. This reflection enabled me to be open to emotions that revealed these values by indicating that my experiences were not congruent with my expectations. I had an emotional response to many of the things I saw and experienced in Ecuador and India. Ellis (1991) argued that emotions may indicate the private processing of sociocultural norms. During my international immersion experiences, I reflected on and processed norms that I grew up with as well as norms of
the profession of occupational therapy. According to the Occupational Therapy Practice Framework: Domain and Process (3rd ed.) (AOTA, 2014a), the values of the profession can be summarized as practice that is “occupation-based, client-centered, contextual, and evidence-based” (p. S3). Social justice and occupational justice are also values of occupational therapy. Social justice, the fair and equitable treatment of individuals and distribution of resources, is an ethical standard of occupational therapy (AOTA, 2010). The concept of occupational justice expands on this ethical standard and includes the right of all people and communities to “meet their needs of survival, physical, mental, and social development through occupation” (Wilcock & Townsend, 2014, p. 542). I was sad when noticing the unequal distribution of resources and the difference in access to meaningful occupations experienced by the children in Ecuador and India. According to Ellis (1991), these emotions may have risen from a realization that these realities were incongruent with my expectations that were shaped by my culture and background. From my upbringing and from my exposure to the culture of occupational therapy, I expected children to have access to quality health care and fair treatment. These expectations indicate my internalization of the values of occupational therapy, a commitment to quality care for all people.

Throughout my international immersion experiences, I was removed from supports that I had often relied on in the United States. I was not in a classroom with a professor or in a fieldwork setting with a supervisor. I could not expect to be able to communicate in the same language with most of the people around me. I participated in unfamiliar routines and customs. Without familiarity as a support, I had to find different
ways to address stressful situations, using personal characteristics as well as the skills and roles of occupational therapy that I had internalized. During these times, I relied on myself and my classmates. Relying on classmates, I developed deeper relationships with my peers and learned from observing how they behaved in various situations, which Sabari (1985) recognized as an important mechanism in which occupational therapy students become socialized to the profession. Relying on myself, I was assertive and took a leadership role with my peers, two important personal characteristics I had not previously considered strengths. Relying on myself in unfamiliar settings and making decisions to act while feeling uncertain or vulnerable taught me about myself and my role as a developing occupational therapist. These experiences highlight the important mechanism that Schaber (2014) states is an essential part of occupational therapy education. Just as occupational therapy practitioners emphasize the importance of meaningful doing by clients, effective pedagogies also emphasize doing by students through active engagement in activities.

Conclusion

Participating in two international immersion experiences as an occupational therapy student, I learned about the knowledge, skills, culture, and ethos of occupational therapy and began to internalize many parts of this culture as I developed my professional construct. I experienced emotions such as sadness when observing differences in access that some people have to some types of health care and resources including food, shelter, and assistive technology. Analyzing these experiences through the method of autoethnography identified specific mechanisms of my socialization including interacting
with professors and professional occupational therapists, personal reflection, interacting with others in a culture different from my own, and experiencing uncertainty and vulnerability. Furthermore, exploring my experiences through autoethnography revealed that my professional construct had been shaped by integrating my personal background with the culture of occupational therapy. I internalized the values of occupational therapy that aligned with my personal values through the process of socialization.
APPENDIX

Selections, *Ecuador Guiding Questions for Reflective Journals* (Gilbertson & Cohn, 2013)

Journal Response 1 US (pre-departure): Reflect in writing on the following questions:

- What do you hope to learn from this experience?
- What are your expectations of this experience? Where do they come from and what are they about?
- How do you respond when your expectations are not met? How do you want to respond?
- What skills are you bringing to this experience?

Journal Response 2 US (pre-departure)

- Do you have concerns or worries about the trip? If so, what are they?
- We are all biased to view the world from our own perspective (Bennett, 1986), and often we don’t see ourselves clearly until we are faced with difference. The experience in Ecuador is an opportunity to reflect on your beliefs and values and to better understand the practices, beliefs, and values of others. Describe your culture (though if you prefer not to respond to certain questions you may skip items)
  - Age:
  - Race:
  - What national/ethnic identities do you hold?
  - Sexual orientation:
  - Language abilities (other than English):
  - How do you define your own health status?
  - How would you describe your physical size and appearance?
  - Family values (In answering the items below, describe your family’s values, not education completed or financial status, etc.)

Journal Response 5 (Quito Days 4–5):

- Describe the facility where you are learning, observing, and participating
- Describe something you observed that you think is different from a similar site in the US
  - What are your thoughts about the potential reasons for these differences
- Describe something you observed that is similar to a comparable setting in the US
  - What are your thoughts about the potential reasons for these similarities?
- Describe an observation (include cues: objects, actions, words) in the clinical site that might be an indication of culture. Include your reflections on why you think the observation was salient for you.
Journal Response 6:

- Describe an incident that occurred this week that challenged you in some way?
- Explain why it was challenging.
- How were your assumptions challenged and did you come to a new and different understanding because of this experience?
- What did you learn about yourself from experiencing and reflecting on this incident?

Journal Response 8 (Quito Day 12):

- Reflecting back on the time spent at your site, and during the past weeks in Ecuador consider:
  - Despite language limitations, how did you build rapport?
  - Consider power and privilege and reflect on what you observed and experienced.
  - How do you think you were perceived at the site?

Final Journal Response 10 (Quito to US Day 14)

- Describe expectations and assumptions that were met by this experience
- Describe expectations and assumptions that were not met by this experience
- How do you think your beliefs and values influenced your experience in Ecuador?
- What have you learned about yourself from your experiences in Ecuador?
- Has anything you have learned changed you, your view of yourself, others, the world? If so, please describe.
- How might this learning influence your participation as a student in the rest of your OT academic program or your future occupational therapy practice?
References


VITA

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