THE ISSUE IS

Will the Opacich Fieldwork Model Work?

Fieldwork is an integral and valuable aspect of occupational therapy education (Presseller, 1983). It provides the practical application that helps to make meaning of the theoretical constructs given in a classroom setting. In recent years there have been decreased numbers of traditional fieldwork sites, particularly in the area of mental health because fewer occupational therapy supervisors are available. Since 1973, the percentage of registered occupational therapists practicing in mental health settings has declined from 18% to 11.7%, and for certified occupational therapy assistants from 26.6% to 16.5% (American Occupational Therapy Association [AOTA], 1991). This trend, combined with an increased number of qualified occupational therapy students and the addition of newly developed certified occupational therapy assistant and occupational therapy educational programs nationwide, has made it difficult to secure both Level I and Level II fieldwork placements.

The lack of sufficient fieldwork sites identified in both the United States and Canada (Atwater & Davis, 1990; Kautzmann, 1987; Ryan, 1987; Thompson & Proctor, 1990) has prompted several suggestions for alternative models of fieldwork education (AOTA, 1987; Bell 1986; Crist, 1986, 1993). Proposals have included more education for fieldwork supervisors (Cohn & Frum, 1988; Kautzmann, 1990); a 2:1 student—clinical instructor model (DeClute & Ladyshewsky, 1993; Ladyshewsky & Healey, 1990); a split placement model, that is, one fieldwork experience with more than one supervisor or setting (Gaipritman & Fruma, 1991); a group model, in which groups of students at one site are supervised by one or more supervisors (Crist, 1993); a self-directed learning model, which increases the students’ responsibility for their own learning (Gaipritman & Anthoy, 1989); a change in the number of hours for or the schedule of fieldwork (Adelestein, Cohn, Bakes, & Barnes, 1990; Crist, 1993; Missiuna, Polatiwko, & Ernest-Conibear, 1992); and the use of nontraditional sites that do not offer occupational therapist supervision (Thompson & Thompson, 1987a, 1987b).

Many of these suggestions minimal alter traditional models without actually changing their foundations. Opacich (1993) however, proposed an alternative fieldwork model, suggesting that each fieldwork setting be viewed in light of all three of the traditional domains (biological, psychological, and sociological) that characterize occupational therapy practice across the life span. Each fieldwork setting would therefore be identified by the primary emphasis it placed on a particular domain. For example, a brain injury setting might place primary emphasis on the biological domain, secondary emphasis on the psychological domain, and tertiary emphasis on the sociological domain. This method of describing and identifying fieldwork sites allows recognition of the psychosocial component in all occupational therapy practice. This recognition of the psychosocial component would then serve to broaden fieldwork education, facilitating a more holistic view of clients and settings and potentially facilitating the number of sites available for placement students.

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Although the Opacich model provides an interesting alternative, we wondered whether fieldwork sites would be able to accommodate those changes. Therefore, University of New England (UNE) fieldwork educators decided to survey New England sites to determine their willingness to adapt their fieldwork programs to the Opacich model. We developed a survey consisting of six questions, one of which asked for a determination of areas of focus (identifying each of the three domains as primary, secondary, or tertiary), and another that questioned their willingness to change the definition of these sites to be more intentional about including a psychosocial component. Additionally, we asked questions to determine the site’s ability to use innovative supervision as well as to seek feedback on alternative or innovative approaches to fieldwork. A total of 302 surveys were mailed along with copies of the Opacich article; 229 were returned, for a total return rate of 75.8%.

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NEED FOR MORE PSYCHOLOGICAL SETTINGS

A number of respondents to the survey indicated that they felt there was a need for more psychological settings, and, in fact, may contribute to the watering down of mental health programs. A few of the respondents expressed concern about the need for more psychological settings.

The number and diversity of responses to the survey indicate a widespread concern about fieldwork. Even though those who commented negatively about changes were careful to explain that their present circumstances prevented them from engaging in that change process, practitioners appeared eager to provide written feedback but also to engage in a dialogue with other clinicians and academicians. Respondents appeared concerned about the future of fieldwork; they value its role in completing the basic preparation of occupational therapists and want to have a voice in shaping it for the future.

Recommendations

Other implications drawn from the survey suggest a need to increase efficiency in securing fieldwork sites, decrease competition, and increase the availability for students. The use of regional coordinators is a way to begin to address these needs. Although student choice would be minimized, if not abolished, in such a scheme, the number of current cancellations decreases any illusion of real choice. This approach would also affect the amount of autonomy an individual academic institution has. However, having one person calling fieldwork sites within a particular region would diminish the amount of time that fieldwork educators and clinical supervisors need to devote to taking and returning phone calls. It would also provide academic fieldwork coordinators with more time to offer concrete help to fieldwork sites for visits, consultations, and development of guidelines for innovative placements.

Serious consideration also must be given to the use of and increased reliance on fieldwork placements that are not supervised by occupational therapists. Canadian occupational therapists have employed this practice successfully on a limited basis (Thompson & Thompson, 1967a, 1987b). Can such sites be used for a percentage of required Level II fieldwork hours? The use of such sites has been offered in 2- or 3-month experiences, with one affiliation being in a physical disabilities setting, another in a mental health setting, and a third, if chosen, in a pediatrics or specialty setting.

One of the dilemmas for occupational therapy fieldwork education is how to maintain and promote a holistic approach when our traditional model is a separatist one. Traditionally and historically, most Level II fieldwork education has been offered in 2- or 3-month experiences, with one affiliation being in a physical disabilities setting, another in a mental health setting, and a third, if chosen, in a pediatrics or specialty setting. Although this arrangement has never been prescribed by AOTA. The shortage of settings in the most Level II fieldwork education has increased the demands for efficacy and have forced us to examine not only how we will meet the unrelenting need for space but also how we will fulfill the expectations for effective and meaningful application of education for our students. Although health care delivery, and even health care reform, are reimbursement driven, we cannot abandon the humanistic and holistic values on which our profession was built. Reflection on our roots leads us to the importance of the inclusion of psychosocial considerations for our clients. One way to accomplish this is to have sites that function within a medical model, where the primary focus is biological, include psychosocial issues in their treatment planning more overtly, just as sites whose primary focus is psychosocial need to become more overt about addressing clients’ biological needs. A collaborative approach between academic and fieldwork educators would be necessary to pro-
provide training and support for affecting these changes.

The fieldwork reconceptualization offered by Opacich is intriguing. However, the results of the New England survey indicate that its acceptance and implementation by fieldwork sites may be limited even though it is apparent that a small percentage (31%) of them would be willing to try the Opacich model. Because the survey is regional, it will be important to conduct a nationwide survey to determine the generalization of these results. A pilot study done with a small number of mature, independent students with flexible learning styles is also recommended. It would focus on implementing the Opacich model and determine whether this holistic and innovative approach can be effective in preparing future occupational therapy practitioners to meet the needs of clients within the health system of the 21st century.

Only the holistic and flexible perspective on the part of field educators, both academic and clinical, will allow us to begin to effectively resolve the current dilemmas of fieldwork education. The use of a model that is built on an integrated foundation and the consistent and overt voicing and evaluation of such a perspective, regardless of whether the primary focus of the particular site is biological, psychological, or sociological, may allow us to initiate viable solutions.

References
Crist, P. (1993, March). Nontraditional and group fieldwork models: Their time has come. Education: Special Interest Section Newsletter, pp. 3-4.

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