Emergence of Scholarship in the American Journal of Occupational Therapy

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MeSH TERMS
• history
• occupational therapy
• research

We undertook a content analysis of 192 American Journal of Occupational Therapy articles published from 1947 to 2010 to understand and explicate the emergence of scholarship within the profession. Scholarship includes scientific inquiry, empirical research, and other forms of inquiry. We identified and coded three aspects of the development of scholarship: argument, methodological rigor, and occupational focus. All three aspects increased over the evaluated period, during which substantial changes occurred in the profession’s practice and access to higher education. We see the development of scholarship as aligned with the claiming of the profession’s independence and voice.


In 1947, the American Occupational Therapy Association (AOTA) launched the American Journal of Occupational Therapy (AJOT; Kahmann, 1947). AJOT is the repository for AOTA’s official documents, is the leading occupational therapy journal internationally (Brown, 2011), and is ranked by published occupational therapists as being the highest in quality (Rodger, McKenna, & Brown, 2007). Moreover, the journal represents the profession’s research priorities (AOTA/American Occupational Therapy Foundation [AOTF] Advisory Panel, 2011), research findings (Philibert, Snyder, Judd, & Windsor, 2003), and research quality (Madill, Brintnell, & Stewin, 1989).

Initially the mission of AJOT was to promote knowledge and understanding in the field (Bone, 1947). Currently it gives priority to contributions that report effectiveness and efficiency studies, meta-analyses, systematic reviews, reliability and validity studies of occupational therapy instruments, and studies reporting the contribution of occupation to participation and health (“Guidelines for Contributors to AJOT,” 2011). Publication patterns in AJOT have been previously examined (Christiansen, 1991; Spaight & Krippard, 1967), and more recent studies have examined the emergence of research in occupational therapy publications (Andresen, Tang, & Barney, 2006; Case-Smith & Powell, 2008; Cusick, 1995; Mountain, 1997). No one, however, has analyzed publication patterns across the six decades of articles published in AJOT.

Because of its quality, international reputation, and length of publication, we sought to understand and explicate the emergence of scholarship in occupational therapy by conducting a content analysis of a random sample of AJOT articles published from 1947 to 2010. This article presents the results of this content analysis by describing the development of scholarship in the field. Our research questions were the following: (1) What are the characteristics of AJOT contributors? (2) How is the development of scholarship reflected in AJOT articles? (3) What is the publication trajectory of empirical research and occupation-focused research?
Scholarship in Occupational Therapy

Scholarship is a broad term that refers to scientific inquiry, empirical research, and other deliberate forms of inquiry that rely on a thorough, logical, and critical analysis of a topic. The latter form of scholarship, critical analysis, occurs in philosophical, historical, and literary studies (Abreu, Peloquin, & Ottenbacher, 1998). Scholarship requires a systematic approach to answering questions and provides new knowledge and understandings about occupation, its relationship to health and well-being, and the ways it can be used to promote positive change in individuals, groups, and the broader society (Yerxa, 1987). It is through the review and dissemination of scholarship that knowledge and understanding are advanced (Boyer, 1990; Glassick, Huber, & Maeroff, 1997). Empirical research is one subset of scholarship and refers to processes of generating questions and answering them through diverse forms of systematic, logical, and ethical data collection and analysis (Abreu et al., 1998). In this article we use the more inclusive term, scholarship, to refer to the breadth of knowledge-generating activities, and we use research to refer only to empirical research.

Although Bone’s (1947) first editorial claimed AJOT as the venue for publishing scholarship, scholarly articles were not prominent for many years despite the exhortations of many professional leaders. Early Eleanor Clarke Slagle lecturers called for research to test the efficacy of equipment (Stattell, 1956), contribute to the body of knowledge of occupational therapy (Rood, 1958), scientifically test hypotheses (Ayers, 1964), and examine the basic beliefs of the profession (Reilly, 1962). Reilly (1960) argued that science was necessary to answer questions and assumptions about the relation between occupation and health. She rejected the “no time” excuse, saying, “If we persist in being too busy to think, we may prove more dangerous in treatment” (p. 207).

Calls for research did not abate in following decades (see, e.g., Baum, Boyle, & Edwards, 1984; Kiilhofner, Hammel, Finlayson, Helfrich, & Taylor, 2004; Mosey, 1971; Yerxa, 1991). AOTA, the AOTF, and individual occupational therapists responded to these calls. The 1953 AOTA Institute on Research identified areas for study, provided training on research skills, and presented studies conducted by occupational therapists (Welch, Watson, Vanderkooi, & Matthews, 1954). The AOTF sponsored a research seminar in 1976 to identify research questions and developed a roster of research consultants to support the development of research projects by occupational therapists (AOTF, 1976). In 1981, the AOTF established the Occupational Therapy Journal of Research, a journal designed to publish empirical research (Llorens, 1981). The AOTF articulated research competencies needed by clinicians, managers, educators, and independent investigators and scholars (Academic Development Committee, 2000; AOTF, 1983). As the profession enters its second century, the Centennial Vision (AOTA, 2007) has influenced AJOT priorities for empirical research to demonstrate the effectiveness of occupational therapy (Case-Smith & Powell, 2008) while calls for research related to the understanding of occupation continue (Reed, Hocking, & Smythe, 2011).

Articles on research methods emerged in AJOT in the 1970s. For example, beginning in 1970, Ethridge and McSweeney published a six-part series on how to conduct research, focusing on experimental and quasi-experimental design. Other articles on research methods followed (see, e.g., Christiansen, Little, & Backman, 1998; Cohn & Lyons, 2003; Ottenbacher & York, 1984). Linda Tickle-Degnen edited a special section of AJOT devoted to evidence-based practice from 1999 through 2003.

Graduate education at both the master’s and doctoral levels is necessary for the development of the capacity to critically read and conduct research (Academic Development Committee, 2000; AOTF, 1983). For example, early studies of publication patterns (Radonsky, 1980) and professional productivity (Rogers & Mann, 1980) of occupational therapists revealed that published occupational therapists were more likely to possess a master’s rather than baccalaureate degree. Although basic research skills are the outcome of most master’s degree programs, doctoral degrees provide the background to conduct significant scholarly work, particularly empirical research (Academic Development Committee, 2000). Doctoral preparation was slow to emerge in the field. In 1963, only five U.S. occupational therapists had earned doctorates (Jantzen, 1972). By 1978, this number had increased to only 70 (Rogers & Mann, 1980). Today the field is approaching a critical mass of highly trained scholars; at least 2,000 practitioners have research doctorates in occupational therapy, occupational science, or a related field (personal communication, C. Christiansen, October 14, 2011).

Method

Content analysis is a noninterventionist research methodology that can be used both quantitatively and qualitatively (Cronin, Ryan, & Coughlan, 2010). It uses existing data, and researchers therefore do not impose structure or bias through data collection (Krippendorff, 2004). In content analysis, the researchers may count the occurrence of events, themes, or words in the text (Elo & Kyngäs, 2008) and explore the context, the meaning, and content of the data for more interpretative results. Content analysis...
methodology can, according to Elo and Kyngäs (2008), be approached deductively (with a priori assumptions) or inductively (without a priori assumptions). In our preliminary analysis, we used a deductive process with established categories to understand the data more fully. Following examination and discussion of these initial categorizations of the data, we inductively developed a synthesized coding scheme. See Table 1 for a detailed explanation of our data collection and analysis process.

Synthesized Coding Scheme

Three aspects emerged as important aspects of scholarship in occupational therapy: argument, methodological rigor, and occupational focus. For each, we developed a 4-point scale, with 0 indicating that the aspect was not present and 3 indicating the presence of consistent, integrated quality features (see Table 2).

**Argument** denotes statements made when presenting reasons for accepting a given conclusion (Bell, Stains, & Mitchell, 2001). Scholarly writing involves a crafted argument; the use of references or quotes from other sources; and clear positioning in relation to the existing knowledge, regardless of the focus of the article and whether it involves the collection of observations or measurements.

Empirical research requires methodological rigor, which involves structured inquiry consistent with a research question and methodology involving data collection and analysis. Methodological rigor is an indicator of the integrity or congruence among question, methodology, data collection, data analysis, and application or implications (Conrad & Serlin, 2006). Methodological rigor was coded 0 if the article did not contain specifically collected data.

**Occupational focus** exists separately from a competently argued or methodologically rigorous article. Because the use of the term occupation has varied considerably over the years (Bauerschmidt & Nelson, 2011), we considered any mention of tasks or activities of interest to people performed in a context consistent with the represented culture of the time to be occupational.

### Table 1. Data Collection and Analysis Process

<table>
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<th>Step</th>
<th>Activities</th>
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| Select sample.                            | 1. Using a random number generator, select 4 volumes for each decade from 1947 through 2010 (1947–1959, 1960–1969, and so forth). Twenty-four volumes were selected.  
2. Using the author index for each sampled volume and a random number generator, select a sample of 8 unique articles per sampled volume, resulting in 32 articles per decade and a total of 192 articles across the six decades. Editorials, letters to the editor, and book reviews were excluded. |
| Develop descriptive tables (deductive).   | 1. Using preexisting typologies and categories, code the articles to develop an understanding of the scope of the sample. The categories are as follows:  
- Author characteristics: last name, title, credentials, discipline, organizational affiliation, gender  
- Characteristics of article: year, initial page number, length in pages, number of references, number of references from occupational therapy sources (e.g., from an occupational therapy journal or a book with occupational therapy in the title or written by an occupational therapist)  
- Article descriptor: empirical research, scholarly (e.g., literature review, theoretical), practice description, service description, program description, equipment, opinion (e.g., “The Issue Is” column)  
- Method (for empirical articles only): for example, quantitative, qualitative, pilot study  
- Type of scholarship: Scholarship of discovery, integration, practice and teaching (Boyer, 1990); scholarship of discovery, integration, application, teaching, and learning (AOTA, 2009)  
- Content: Occupational Therapy Practice Framework: Domain and Process (AOTA, 2008; e.g., areas of occupation, performance skills, performance patterns, performance context)  
- Voice: “women’s ways of knowing” (Belenky, Clinchy, Goldberger, & Tarule, 1986); for example, silence, received, subjective, procedural, constructed |
| Code sample using descriptive categories.  | 1. Independently read and code each article.  
2. Construct preliminary descriptive table based on coding decisions to get a general understanding of the sample.  
3. Discuss and clarify coding decisions. |
| Develop simplified coding scheme (inductive). | 1. Develop a synthesized coding scheme based on our understanding of the sample. The categories that emerged were  
- Argument,  
- Methodological rigor, and  
- Occupational focus.  
2. Develop criteria for each category.  
3. Independently code a portion of the data to clarify criteria, and revise criteria following discussion.  
4. Obtain peer review of criteria for each category from two colleagues. Revise criteria on the basis of feedback (see Table 2 for final criteria).  
5. Independently code sample.  
6. Discuss coding decisions and resolve any discrepancies until we reach 100% agreement on the coding decisions.  
7. Randomly select an additional 25 sample articles (12.5% of sample) and recode independently to confirm agreement on coding decisions (no discrepancies occurred). |

*Note: AOTA = American Occupational Therapy Association.*
Table 2. Criteria Used in Coding Argument, Methodological Rigor, and Occupational Focus

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<tr>
<th>Aspect of Scholarship</th>
<th>Score</th>
<th>Criteria</th>
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<td></td>
<td>3</td>
<td>Argument is consistently and persuasively coherent. Argument is well articulated and elegantly structured and written.</td>
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<td></td>
<td>Argument effectively integrates diverse existing literature. Article contributes to knowledge and understanding about the topic.</td>
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<td></td>
<td>Article is balanced and conclusion is well supported. Recommendations for further action (if present) are well articulated and supported.</td>
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<tr>
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<td>2</td>
<td>Argument is coherent but less well articulated than above. Argument is positioned in relation to existing literature, but literature is</td>
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<td>either not well integrated or of lesser quality than above. Article contributes to knowledge and understanding about the topic.</td>
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<td></td>
<td></td>
<td>Recommendations for further action (if present) may not effectively link to the argument or literature.</td>
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<td>1</td>
<td>Argument provides useful links to the issues. Argument is based primarily on personal experience and knowledge. Literature, if used,</td>
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<td>is not well integrated with argument. Integrity of professional practice expertise and author’s passion for the topic are clearly evident.</td>
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<tr>
<td></td>
<td></td>
<td>Article contributes to knowledge and understanding about the topic. Recommend for further action may not effectively link to the argument</td>
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<td></td>
<td>0</td>
<td>Argument lacks focus or coherence. Argument is not positioned in relation to literature. No significant contribution to knowledge and</td>
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<td>understanding about the topic is made.</td>
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<tr>
<td>Methodological rigor</td>
<td>3</td>
<td>There is congruence between the paradigm selected and the research question. Methodology and methods of the selected paradigm are specified</td>
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<td>and well articulated and applied. Ethical standards (congruent with the expectations of the time) are well articulated. Sufficient data</td>
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<td>are presented to support balanced and well-supported conclusions. Recommendations for further research or action are well articulated</td>
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<td>2</td>
<td>An established methodology can be deduced or assumed from the information provided. A planned process of inquiry and data collection is</td>
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<td>present. The focus of the research is evident. Data collection appears to be respectfully and ethically undertaken. Recommendations are</td>
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<td>drawn from the research.</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>Data are used to support the intent of the article. Aspects of the article apply selected ingredients of rigor.</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>Data collection is neither intended nor present.</td>
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<tr>
<td>Occupational focus</td>
<td>3</td>
<td>An occupational focus is integral to the conceptualization of the article using language appropriate to the era. Article addresses</td>
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<td>occupations performed in context related to performance patterns and areas of occupation. Article draws on literature from</td>
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<td>occupational therapy, occupational science, or both. Literature from other disciplines, if present, is reframed, interpreted, and</td>
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<td>applied with an occupational lens. Content concerns occupation or occupation-based practice as it pertains to individuals, groups,</td>
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<td>populations, occupational therapy education, or the development of an occupation-focused profession.</td>
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<td></td>
<td>2</td>
<td>Article has relevance to specific domains or areas of occupational therapy practice (e.g., performance skills, client factors, activity</td>
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<td>demands) using language appropriate to the era. Knowledge from other disciplines, if present, is strongly used and applied to the</td>
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<td>domain of concern of occupational therapy practice or occupational science. Explicit links are made in the conclusion to occupation</td>
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<td>or occupation-based practice, occupational therapy education, or the development of an occupation-focused profession; however, the</td>
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<td></td>
<td>focus of the article is at the level of performance skills, client factors, or activity demands.</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>Article has minimal relevance to occupation or occupation-based practice and pertains exclusively to performance skills, client</td>
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<tr>
<td></td>
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<td>factors, or activity demands. Knowledge from other disciplines or professions is used but is not linked to the domain of concern of</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>Article has no relevance to occupation or occupation-based practice.</td>
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Results: Evolution of Scholarship in Occupational Therapy

The following sections present our findings in relation to general patterns related to the authors, their disciplines, and their educational attainment; the evolution of argument, methodological rigor, and occupational focus; and the increase in empirical research published in AJOT.

Authors

The voice of the profession reflects the degree to which the authors of journal articles were occupational therapists.
the sampled articles \( (n = 32) \) published between 1947 and 1959, 59\% \( (n = 20) \) of first authors were occupational therapists. Twenty-two percent \( (n = 7) \) were physicians, and 16\% \( (n = 5) \) represented other professions. By the 1990s, occupational therapist first authorship in the sampled articles \( (n = 32) \) increased to 91\% \( (n = 29) \), which continued in the 2000s. In both the 1990s and the 2000s, the remaining 9\% of first authors \( (n = 3 \) for each decade) did not designate their professional preparation other than graduate degrees \( (n = 2) \) or were physicians \( (n = 1) \); Figure 1. Papers with multiple authorship increased from 22\% \( (n = 7) \) in the 1950s to 44\% \( (n = 14) \) in the 1990s to 71\% \( (n = 23) \) in the 2000s. Of the multiple-authored articles, occupational therapists were the first author in 57\% \( (n = 4) \) in the 1950s, 86\% \( (n = 12) \) in the 1990s, and 87\% \( (n = 20) \) in the 2000s.

Graduate education in occupational therapy expanded dramatically from 1947 through 2010 and is reflected in the qualifications of occupational therapist authors. Occupational therapist contributors to *AJOT* with any type of master’s degree (e.g., professional master’s, postprofessional master’s in occupational therapy, master’s in another field such as education or psychology) increased from 14\% between 1947 and 1959 to a high of 41\% in the 1970s and 1980s. This percentage has declined as the percentage of doctorally prepared occupational therapy authors has increased. Again, we counted occupational therapists with any doctoral degree designation as doctorally prepared, not distinguishing among the various types of doctoral degrees. There were no doctorally prepared occupational therapist authors before the 1960s. In the 1960s, 7\% \( (n = 2) \) of occupational therapist authors were doctorally prepared. This proportion decreased to 6\% \( (n = 2) \) in the 1970s. By the 1990s, the doctorally prepared occupational therapist authors increased to 52\% \( (n = 23) \) and to 65\% \( (n = 40) \) in the 2000s.

**Development of Scholarship in Occupational Therapy**

Our results illustrate the development of argument and rigor across the 60 years of the journal’s publication. Sophistication of argument increased from an average of 1.09 from 1947 through the 1950s to 2.44 in the 1990s and 2000s (on our scale of 0–3). The line in Figure 2 shows this gradual improvement in argumentation in *AJOT* articles. Methodological rigor of empirical articles increased from less than 1.00 before 1990 to 1.70 in the

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**Figure 1. Author characteristics across the sample of 192 articles.**

*Note.* OT = occupational therapist.
In contrast to argument and methodological rigor, the average occupational focus score shows a U-shaped curve, beginning at 1.44 from 1947 to the end of the 1950s, declining in the 1960s to a low of 0.50, increasing slightly in the 1970s and 1980s, and then more than doubling to 1.88 in the 1990s and 2000s.

**Emergence of Empirical Research**

Empirical research slowly emerged from 1947 to the 2000s, with the most dramatic increase in the 1990s and 2000s when empirical articles outnumbered nonempirical articles. The number of empirical articles with an occupational therapist as the first author increased from 2 of 4 (50%) published between 1947 and 1959 to 24 of 26 (92%) published between 2000 and 2010 (Figure 3).

**Discussion**

**Development of Scholarship: From Received to Constructed Knowledge**

Many early articles, whether authored by occupational therapists or not, consisted of content brought into occupational therapy from other fields, often with limited interpretation of why or how practitioners could use this information. Thus, readers received much information from authorities outside the profession (Belenky, Clinchy, Goldberger, & Tarule, 1986). As examples, Lawton (1949), a psychologist, wrote an article on successful aging, and Hildenbrand (1949), an occupational therapist, brought to the field additional information about the aging population, but neither article made any connections to occupational therapy. In contrast, early articles about adaptive equipment expressed the creativity and inventiveness of occupational therapists as they constructed devices to enable their clients to be more independent and engage in desired occupations. Leply’s (1955) description of a tool to enable people to practice dressing skills after a cerebrovascular accident is one such article. Belenky and her colleagues (1986) called this type of knowledge *subjective knowledge* because the knowledge was derived from direct experience. In contrast to Lawton and Hildenbrand, whose articles represent received knowledge, Leply’s and similar articles reflect the extensive clinical experience typical of subjective knowledge.

**Exemplars of Argument, Methodological Rigor, and Occupational Focus**

We observed variation across the sample in argument, methodological rigor, and occupational focus. Some variations are related to the purpose of the article (e.g., empirical research, literature review, opinion). Also, the specific content of the articles influenced the degree to which they focused on occupation.

In selecting exemplars, we attempted to capture the rich diversity of the sampled articles. They covered the full range

![Figure 2. Development of scholarship from 1947 to 2010.](http://ajot.aota.org/)

*Note. Minimum score = 0; maximum score = 3.*
of quality, from articles with well-positioned, well-developed, and carefully crafted arguments based on soundly explicated and applied methodologies and overtly linked to occupation to articles that lacked logic, contained unsupported and tangential opinions, and had seemingly little relevance to the concerns of the profession. Each article we mention was accepted as worthy of publication at its time. The selected counterpoints are Neistadt (1986), which was the first sampled article to score 3 for argument, methodological rigor, and occupational focus, and Flenner and Meek (1991), which scored 0 in all categories.

In a technically competent article, Flenner, a physician, and Meek, an occupational therapist, described the construction of a stump protector designed to contribute to early healing and prosthetic fitting for a person with a lower-extremity amputation (Flenner & Meek, 1991). The authors provided no justification for this article as a legitimate part of practice (argument), collected no empirical data to evaluate the effectiveness of the protector (methodological rigor), and did not specify an occupation-centered purpose (occupational focus). In contrast, Neistadt’s (1986) article, “Occupational Therapy Treatment Goals for Adults With Developmental Disabilities,” used an established methodology consisting of chart audit to identify adaptive or remedial goals, tests of definitions for reliability, and $X^2$ to test the null hypothesis (methodological rigor). Neistadt described the degree to which therapists addressed adaptive goals such as self-care, communication, and money management (occupational focus). Finally, she reported her findings in the context of previous literature and drew together a coherent and integrated set of recommendations (argument).

We separated argument from methodological rigor because some articles were written to examine, explicate, and promote a particular philosophical or theoretical position rather than answer a research question. Yerxa’s (1967) Eleanor Clark Slagle lecture, “Authentic Occupational Therapy,” is exemplary in drawing together a cogent argument and scored 3 for its effective argument focusing on authentic client–therapist relationships, although it scored 0 for methodological rigor and occupational focus. There will always be a role for scholarly articles such as Yerxa’s.

Bartlett’s (1977) Nationally Speaking article in AJOT described her role as a community therapist in Alaska. This article reflected a clear passion related to occupation in what we would now describe as the profession’s potential role in primary health or health promotion and thus was scored 3 for occupational focus. However, it was scored 1 for argument because it lacked a literature review and concluding point and 0 for methodological rigor because its purpose did not call for data. Likewise, several articles (related especially to the development of assessments) were quantitatively based and methodologically rigorous but had less developed arguments and did not link to occupation-centered practice. For example, Zee-Chen and Hardman’s (1983) article “Postrotary Nystagmus Response in Children With Down’s Syndrome” was scored 2 for argument, 3 for rigor, and 1 for occupational focus.

We saw legitimate roles for rigorous, well-argued articles that did not have an occupational focus. In the past three decades, a number of articles (see, e.g., Katz & Mosey, 1980; Richardson, MacRae, Schwartz, Bankston, & Kosten, 2008) had no focus on occupation because the emphasis of the articles was on student performance. These were
scored 3 for use of established methodologies consistent with the issues and interests of the profession and 3 for their cogent arguments for strategies to recruit and educate members of the profession. An intermediate example is Kimball’s (1977) article “The Southern California Sensory Integration Tests (Ayres) and the Bender Gestalt: A Correlative Study,” which was coded 1 for argument, 2 for methodological rigor, and 1 for occupational focus. The article reported on the correlation between two assessments but did not address occupational functioning or argue how the results related to practice other than to enable screening efficiency. Articles with the highest rigor tended to make strong arguments; no article scoring 3 for rigor achieved <2 for argument.

That the elements of argument, methodological rigor, and occupational focus have been present since early in the profession is demonstrated by the older articles that were scored 2 in all three categories. For example, Beals (1949) promoted the use of numerically based measures of client change in mental health occupational therapy. Articles that have poorly constructed arguments and are not positioned in relation to either our own or another literature are no longer published in AJOT.

**Occupational Focus**

Our data identified a decline in occupational focus in the 1960s, demonstrating the derailment of occupational therapy Shannon (1977) so effectively argued against and the need for the paradigm shift proposed by Kielhofner and Burke (1977). Kielhofner and Burke argued for a paradigm that focused on adaptation, incorporating understandings of occupation with the knowledge developed during the reductionistic period. Bauerschmidt and Nelson (2011) found that the use of *occupation* began in the 1920s in official publications of AOTA; that *occupation* was substituted by *activity* from the 1940s to the 1960s; that *occupation, activity,* and related terms largely disappeared in the 1970s and 1980s; and that *occupation* increased again in the 1990s. In contrast to Bauerschmidt and Nelson’s findings, our findings show a slight increase in occupational focus in the 1970s and 1980s. But like Bauerschmidt and Nelson, we found that it was not until the 1990s and 2000s that a focus on occupation exceeded that of the 1950s (see Figure 2).

Another possible cause of this derailment is that during the 1970s and 1980s, occupational therapists were not participating in occupational therapy–based doctoral education; instead, they were learning to conduct research in fields related to occupational therapy, such as psychology, sociology, anthropology, and education. Consequently, they may have used other disciplines’ thinking and research methods to address questions without a specific focus on occupation. That the research questions were less likely to have a direct link to occupation was illustrated in Kimball’s (1977) correlative study comparing the Bender Gestalt Test with the Southern California Sensory Integration Test. We think this retreat from occupation may have been necessary during the development of expertise in empirical research. In addition, the reductionistic medical model dominant during that time fostered research on the development of body function and skills; see, for example, Short, Watson, Ottenbacher, and Rogers’ (1983) examination of vestibular–proprioceptive functions in 4-yr-olds.

In contrast, in the 1990s and 2000s, broader issues of occupation and participation became more dominant when research-prepared occupational therapists were in control of both the research question and methods; see, for example, Blakeney and Marshall’s (2009) study linking water quality to health and occupational participation.

**Finding Our Voice**

Argument, methodological rigor, and occupational focus all were present over the sampled period. Argument and rigor developed before an increasingly overt reclaiming of the profession’s focus on occupation, which had been much stronger in the first decade of AJOT. Building on Menkel-Meadow (1996), we have framed these changes as reflecting the evolution of the profession’s voice. The role, identity, and core business of occupational therapy have become progressively integrated as occupational therapists have learned how to think about, explore, critique, and articulate our profession’s core concerns. That the need for occupational therapists to be able to conduct research and hence justify their practice was called for long before most occupational therapists had the skills to do this does not surprise us. Occupational therapists initially received the processes of scholarly inquiry and rigorous empirical research from other disciplines. Now, our research reflects our profession’s priorities and integrates our values and beliefs with the quality of our arguments, the rigor underpinning our empirical research, and the occupation-centered nature of our conceptualizations.

We believe these developments also parallel changes in women’s lives across these decades, given that occupational therapy remains a largely female profession. As members of the profession increasingly engaged in postprofessional education, the perception of the profession itself evolved to more fully incorporate the importance of research and scholarship. We believe these perceptions changed within the institutions occupational therapists work in as well (Goldberger, Tarule, Clinchy, & Belenky, 1996). Interestingly, our literature is silent on any influence of the gendered
nature of the profession. The most notable exception is the 1992 special issue of *AJOT* on feminism as an inclusive perspective, edited by Froehlich, Hamlin, Loukas, and MacRae (see also Hamlin, Loukas, Froehlich, & MacRae, 1992).

**Limitations and Implications for Research and Practice**

This study used randomized sampling based on a fixed number of items per decade. A different sample may have yielded somewhat different results. Also, demographic information about occupational therapy practitioners, their employment patterns, and their postprofessional education has not been collected in a national survey since Gilkinson and Henton’s research in 1984. This lack of data limits our understanding of changes in the employment and education patterns in the profession.

Although we have argued that scholarship and research in occupational therapy have become increasingly sophisticated, we have little understanding of the lives of active scholars in the field. For example, we do not understand the motivation and life decisions that have enabled major scholars to develop established programs of research. We do not understand how and why occupational therapists decide to pursue doctoral education to conduct research.

Moreover, we note, with some amusement, that there is little analysis of how gender may have been or continues to be an influence on the profession’s development, research priorities, or status. Consequently, little empirical evidence indicates whether and how being a largely female profession has influenced the development of scholars or of the profession itself. Because the development of empirical research in occupational therapy continues to be a major priority, research into these areas is needed to help promote a climate that encourages the development of scholarship and research in the future.

Although the focus of this article is historical in nature, it has practical implications for practice and education. The coding scheme we developed will assist students and practitioners with assessing publications, particularly older articles, for application to evidence-based practice and for practitioners with assessing publications, particularly older articles, for application to evidence-based practice.

**Conclusion**

*AJOT* increasingly reflects the voice of the profession and its research priorities. Access to higher education beginning in the 1970s and 1980s provided occupational therapists with newly acquired skills of inquiry and procedures associated with building an argument on the basis of credibly collected and analyzed data, and this development was reflected in the articles in the sample. Postprofessional education has increasingly been integrated into the profession and is related to the authority of occupational therapy’s voice in our profession’s preeminent publication. Finally, from the mid-1990s onward, we found what Belenky and colleagues (1986) called *constructed knowledge*, which brings the systems of specific reasoning and knowledge into congruence with emotional and personalized experiences to create integrated voices that recognize the constructed nature of knowledge and relationships. It is not accidental, we think, that the focus on occupation has been restored as we construct our knowledge in relation to our profession’s view of the world.

Occupational therapy scholars are capable of building coherent arguments based on rigorous empirical research with a strong occupational focus. Occupational therapy, with homage to Reilly (1962), is becoming one of the great ideas of the 21st century. We see the reemergence of a focus on occupation as a claiming of our professional voice, which finally integrates our practice experiences and scholarly understandings. Indeed, it will be interesting to see whether occupation-centered methodologies will be developed to answer occupation-centered questions. We have developed our own voice, and we can at last answer our own questions and maybe, in time, in our own way.

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