

AN INTIMATE JOURNEY ALONG THE PROFESSIONAL IDENTITY

UN RECORRIDO INTIMISTA A LO LARGO DE LA IDENTIDAD PROFESIONAL

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Introduction

The identity is a complex topic broadly developed in the psychological literature, anthropological literature, etc. From the point of view of the occupational therapy, the concept of identity has, for authors like Christiansen¹, a crucial relevance in the development of the vital different stages. For this author, the identity it is a very wide concept that in summary could be defined like an orderly vision of ourselves that includes as much the self-esteem as the self-concept and that is influenced by the social wide world in which we are. Christiansen postulates that the occupations are the key, not to be person, but to be a particular and unique person; likewise he asserts that the daily activities are good as important purpose to enable us to experience or to develop our personal identity.

SUMMARY

This article presents an intimate and nearby point of view of the professional identity through the emotions, sensations and the occupational therapists' realities in their way to acting and growth. Through the revision of different stages (exploration, competition and achievement), the article is a reflection on the interrelation between professional identity and personal identity. Daily situations, concerns and experiences shared throughout several years between the author and occupational therapists in different evolutionary moments (university students, beginner postgraduates and experts) are described.

RESUMEN

Este artículo presenta un punto de vista intimista y cercano de la identidad profesional a través de las emociones, sensaciones y realidades de los terapeutas ocupacionales en su camino de desempeño y crecimiento. A través de la revisión de diferentes etapas (exploración, competencia y logro), el artículo es una reflexión sobre la interrelación entre identidad profesional e identidad personal. Se describen situaciones cotidianas, preocupaciones y vivencias compartidas a lo largo de varios años entre la autora y terapeutas ocupacionales en diversos momentos evolutivos (estudiantes universitarios, posgraduados noveles y expertos).

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The occupational therapy, whose center of interest is the occupation, sees the personal identity broadly linked to the daily task, since the occupations provide us the contexts and necessary opportunities for the creation of significant lives. The act of carrying out and finding a purpose in what we do, allows that we feel well with ourselves, gives us a self-realization sense and allows us to be in front of the other ones (because "to make" always has a social meaning). Throughout the vital different periods that we cover, we go taking more and more and more conscience of who we are, what we appreciate in the life (value, interests) and what we want to end up being and make. In this way, we go defining ourselves as singular and unique beings, and finding in our performance, a vital sense, a reason of living.

Without a doubt our profession, the occupational therapy, is singular. For this, the occupation with meaning is the base and foundation on which is built the identity and personal realization. For this reason, the professionals of the occupational therapy should know and meditate attentively on their own work, on their own occupational own identity and the interrelation of this with their personal identity.

From this positioning, the professional will be much prepared to be able to advice and to guide people with broken occupational identities by new roads of significant occupational performance.

As occupational therapist, teacher and psychodramatist, this topic has been of special interest for me, developing for twelve years courses and specific workshops for occupational therapists in professional diverse moments. I have developed a group´s methodology using group´s dynamics, social-drama and psychodrama techniques applied to the occupational therapist's role and to the vital moment of the group. During approximately five years (1996-2001) I applied it with university students of second and third course inside the subject of Practical Stays. Parallel and later on (1999 - present time) I am applying it through courses imparted especially for occupational therapists that work, in the area of mental health of the Autonomous Community of Madrid, of Extremadura and of Castilla-La Mancha. They are courses about experience, self-knowledge and reflection on the use of the self as therapeutic tool and of the reflexive analysis of the professional practice and their incidence in the own identity. I call them "*spaces of growth*" because really, they allow the therapists to overturn their daily work in a therapeutic and controlled space, where they will find many models of making, of thinking and of feeling on the role, allowing the guided and constructive reflection of their daily work. The result is that the therapist leaves of these courses reinforced in his/her professional and personal identity and with a renovated attitude toward the daily work.

Based on this experience above described, I will develop the content of the present article. Before this, I would like to express my gratefulness to all those professionals and students that have put on in my hands and whose I have learned so much.

1. THE STAGE OF LEARNING

This stage is attributed to the moment of the vocational election and when the occupational therapist is beginner and inexpert. The moment of the career election is a vital moment loaded with meaning for the person. In general, it takes place during the youth's (between the 18 and the 25 years of age) stage. Taking Erikson² like reference, in the youth, people feel surer and calmer than when they were adolescent but they still lack the enough maturity and personal balance. It is an ideal time for the intellectual development, to take initiatives and to clarify ideas. The desires to commit and to develop moral values which are high-priority for the unique person appear in this moment.

This is the stage in which the youth is guided and the person makes decisions with regard to his/her profession, toward the world of the work where to carry out his/her vital and existential own project. To carry out that election, it is the fact, the person puts at stake all his/her knowledge on the world (real possibilities, resources, etc.) and personal (who is she/he, who wants to be, how he/she wants to live, which their values and beliefs are, etc.). So, the election of the profession marks an inflection point in the vital cycle of a person, guiding it toward the future, his/her future, a future that gives sense to his/her life and responds to an existential objective. The aspect of the values, friendships and personal interests, marks the vocational election deeply in this stage. Therefore, when choosing the occupational therapy as profession, the person is unquestionably assuming as his /her own the meaning of the name therapy, this is, to help people returning his/her to a state of harmony and entirety.

Surely, they are many the youths that, when choosing this profession, don't make it based on the deep knowledge of the profession neither to an objective, we could say, so altruistic. But throughout their formation like occupational therapists, they go discovering and assuming the authentic values of the

profession. Just as Yerxa³ says about the Occupational Therapy: ".the profession is based on the values that have impelled it during the last 100 years: to endorse the professionals' essential humanity and dignity, looking for upper levels of the patient-agents' vital satisfaction, even of those with serious deteriorations; to maintain and to improve the health, discovering and fulfilling the virtues and the resources of these people; to stimulate the personal autonomy and the responsibility; to maintain a generalist, integrated perspective, not of the human being's specialist perspective...,... to have faith in human potential...etc.". So, the students of occupational therapy discover the possibility to develop a labor role where they have a lot to learn of the human being and of themselves. They have the obligation of not only to study and to be expert in the occupational human nature, but besides that, they have to be sensitive to the potential and each person's individual capacities and to choose options of activities that have meaning for the vital project of the person.

But, just as A. Trujillo ⁴ says in his work, there is a second dimension that gives sense to the professional exercise: it is the ethics."The ethics is the expression of peoples ´ morals, because in the ethics of the behavior the individual morals and of the social groups is expressed. While the moral is composed by the values and the personal principles, the ethics corresponds to the actuation, to the external expression of those principles. The occupational therapists, conscious or unconsciously put at stake their moral and ethical principles when making decisions that affect the patients / users. For it, the beginner therapist has to be responsible for assuming and to completing the ethical principles of the profession. It is recommended Hutchinson (1988), who proposes an ethical resource for the attention, in occupational therapy: to endorse the *informed consent* (more information in A.Trujillo ⁴).

During my stage as an educational university student, I have been able to meet many students and be witness of that "growth" in professional and personal identity. Of that learning and capacitating stage it is usually, once this stage is overcome, the image, the memory, the experience of one or another

professional who helped them to create that identity. Kept in their interior, they are conscious, long afterwards, of how they learned to really be therapists starting from the moment in that they studied or they were practicing with... Possibly, that identification would be analyzed from a more dynamic perspective and reach interesting conclusions. Nevertheless, since it is not the objective of this article, it is important to remark that such mechanisms have served so that many good professionals find impulse and grows as therapists, even overcoming those that inspired them.

To understand (and to remember) how students can perceive or live the profession before facing for the first time with the professional reality, being enough to put as example some illustrative metaphors of how they imagine the occupational therapy (Pilar G. Margallo) ⁵ *"A cave to explore", "a bridge", "a river", "a square", "a puzzle", "a salvage chart", "a star in the firmament."*

On the other hand, these other examples are from those students when they have already lived the direct experience of their vocational training:

- *"It is like the birth of a spring, at the beginning it leaves a thin stream of water, but then it is transformed into a big and abundant jet of fresh, crystalline and therapeutic water which satiates the thirst of everybody who drinks" it.*
- *"It is like eating in a buffet in which you can choose many types of foods and conform a succulent meal."*
- *"It is like Africa, the eternal unknown because yearns to be known by all but in fact nobody knows it. Like Africa, the occupational therapy hides many secrets and fascinating fields yet without being discover."*
- *"It is a great mine in which many tunnels still exist without opening up."*

Between the first metaphors and the second one we can observe a comprehensible evolution since we are speaking of people that discover something for themselves, with mind and body and immersed in a clinical environment that up to now was only virtual. After the meeting, however, they

can have a personal opinion, also based in their experiences. In fact, it is in the detailed later definitions to the practical where it is observed that the experience has been personally significant, even, vitally important in their identity. In fact, when they are found again later on, you realize that they are more mature and self-assure people, more aware of their roles and of the personal implications of the tasks they bear.

This period is the period that describes us the occupational behavior of exploration for learning the therapist's role, where the inherent motivation is situated in a very high level and where the feelings of pleasure, fun, excitement and necessity to discover act like the motor of the action. Moreover, it is an important moment to assure if the occupational election has been the correct one, if the occupational therapy offers the opportunities to cover the created expectations, as well as for discovering the most interesting areas based on the personal characteristics of each one.

The occupational therapist's thoughts (the clinical reasoning) on their daily work with patients are fundamental in the formation of their occupational identity. The clinical reasoning is being developed together with the knowledge and the practice (Boyt Schell) 6. At the beginning, the person needs and relies fundamentally on the theory, developing a clinical operative reasoning based on series of basic rules in order to adapt to situations. Sometimes the ethical principles help him/her or interfere in him/her, taking place in some cases a confrontation between the personal thing and the professional thing. For example, the difficulty in the therapeutic relation, especially with users of similar ages and/or with patient with a compulsive and aggressive high answer, usually constitutes the main complaint in practice. In addition it arises the first confrontation with the perception of the profession on other kindred professionals' side (the therapeutic team). This aspect is especially significant for the identity it since, in this stage it is still necessary of a lot of acceptance and *feedback* to integrate occupational therapist's role. The beginner therapist's personal particularities, will suppose that circumstances like these ones,

stimulate or inhibit their occupational performance and their way of increasing their effectiveness, their capacity of clinical reasoning and their satisfaction. When the beginner, throughout his/her learning, finds content and elaboration to his/her experiences, integrating them with his/her theoretical knowledge, goes conforming a strong professional identity and is prepared (although sure, also, a bit afraid) to go on to the practice up to a increasing level of professionalism and effectiveness and enjoying more with it.

2. THE STAGE OF COMPETITION

This stage will correspond to the first years of experience, when the professional learns how to be a competent therapist. Diverse authors like Brenner (1984), Clark, Ennevor and Richardson (1996) or Mattingly and Fleming (1994) ⁶, have developed several studies on the characteristics of the clinical reasoning of the occupational therapists, in relation with their years of experience. Approximately with three years of experience it is considered that an occupational therapist is competent and that he/she still will need another seven to become expert. Being competent means "to be good expert of a technique, of a discipline or of an art" (D.R.A.E. 1992)⁷. A competent person can adapt to the demands of a task.

As the newly graduated therapists begin to exercise their professional role they rush to the role of the EXPERIENCE in capital letters, to the exploration of landscapes and new worlds full with possibilities and shades, before arriving to the sea of calm which gives them the maturity (professional and personal). This stage of the youth's end (21-25 years-old), returning to Erikson ², is characterized by "a healthy rebelliousness that makes the person rejects the impositions and gets to assume a conscience in accordance with his/her acts and gives them the moral value which corresponds them. His/her personal development can end in the autonomy and then the person will know how to integrate to his/her personal convictions the values introduced by the society,

the religion, the group and the work or study environment." This stage habitually coincides with personal big changes. The youth usually goes concluding his/her emancipation and definitive separation from the paternal home and, in compensation, the person acquires a status of responsibility, maturity and a bigger opening to multiples social relationships. The true love begins to appear, as well as the ideologies and political ideas. In this stage, apart from the controversy about bad / good luck, the beginner therapist puts at stake, more intensively than never up to now, the characteristics of his/her personality to be able to be better as an occupational being and human being. Many are those ones who decide to travel to work in other places (some of them, by the way, finish staying forever all), or in other cities different to those of their habitual residence. The main reasons and interests are those of experiencing, exploring and discovering diverse spaces and realities but also, knowing better by one self, as if it was almost about a personal challenge. However, in other people appears a bigger desire of conserving, as far as possible, his/her near environment even when there is a risk of getting less exciting works or experiencing in a more controlled and secure way. It is not about judging postures neither of throwing hypothesis on whether those ones who take major risks, achieving at the end a major professional success or not. The question is that whatever was the reason for the election, it was a responsible and personal volunteer act so, by this way, it supposed a positive experience and a success experience since it is a decision based on the personal interests and values, providing a fair impact to the environment's influence.

In this stage that we describe, which takes from one to five years of professional practice, the therapist focuses his/her inters in the scientific and pragmatic concepts of the practice but, he/she goes developing a special ability to understand and to palisade with the particular narratives of the clients and to recognize ethical aspects of the profession.

From the compiled data of the courses mentioned at the beginning of the report, it is observed that the occupational therapists who spend approximately

between one to eight years of practical experience, show an important development of their therapeutic abilities, as well as an enormous interest and motivation to make his and to experience diverse approaches and techniques. Learning, applying and proving, they acquire the tools that they find more advantageous for the objectives of their interventions and relations with patients.

In the same way, the personal experience of these years has to drive the therapist to an evolution and combination every time more harmonic among what he/she makes, what thinks and what feels. Gradually, the person wins a bigger personal and professional integrity that is translated into an every time more effective empathic capacity with the patient. They are very frequent in this sense the expressions of authentic "*encounter*" *desire* with the other one, of seeing across the other's eyes and to understand through his/her heart. But at the same time, his/her own personality, still delicate, can transform certain experiences into conflicting situations not already resolved. The use of the self as a therapeutic tool begins to be an entire discovery and an exciting world for discovering and for been aware of. The occupational therapists can feel in this stage a strong attraction for personal and vital experiences that help them to know better to themselves and to discovering themselves like therapeutic beings.

I believe that it is necessary to say that at this time of the process of personal and professional identity recurrent topics usually appear, especially among the professionals that work with psychiatric patients. It is about the own fears and weaknesses and how they can be used by patients to damage us. The fear to the own madness or to lose control can affect significantly and to provoke, as consequence, defensive positions and counter-transfer that hinder the ideal development of the therapy.

Another usual topic is related with the constant non professional recognition that ends up in some cases making the person to look for that professional

identity that doesn't find in the occupational therapy, instead in other professions.

The ethical aspects of the practice also appear with certain frequency, especially those which are related with the right grade that the therapist has, many times taught by the work environment, to make patient participates in the program of activities. In Spain the main part of the resources of mental health develops intervention programs, largely group's programs. These programs can become a tight box where to include different types of patients. That is to say that, in many circumstances, the therapist in such way feels that he/she has to adapt the patient to the treatment program and not on the contrary. This type of performances generates many doubts and insecurities since they collide with the principles of the practice based on the client, where people works in a way much more individualized and adjusted to the patient's real necessities. Sometimes, they are circumstances unaware to the own therapist, but they finish rebounding in the patient, those that make the therapist feel bad and insecure of his/her work. Questions about coordination with other members of the team, the transport to the center or economic factors, are aspects of the pragmatic reasoning that appear as preoccupation source. Nevertheless, in spite of the real difficulties in looking for his/her position in the labor world and getting a certain competition grade, the therapist goes being able to feel every time more proud of being it and of being witness of so many and so many vital histories shared with his/her patients. The recompense of having helped them and the gratification received from them, they are without a doubt the best medicine for their self-esteem and value like professional, that is to say, to feel fulfilled being a therapist.

3. THE STAGE OF THE ACHIEVEMENT

This stage will correspond to the expertise, the maturity and the work experience. As the therapist develops, practices and becomes competent

professionally, he/she gets reaching expert's level, a level of domain of a concrete area and this domain reinforces his/her identity notably. We are already in the mature age. According to Erikson ², in this stage of the life (25-60 years) the individual usually reaches the fullness of his/her biological and psychic development. His/her personality and character are shown up relatively firm and sure, with all the individual differences that can be given in the reality.

So that, there are adults with a firm and sure personality capable of an effective behavior in their performance in the life; there are others with a personality not so firm neither sure; finally those who suffer of a poor and faulty way of being (personality) which takes them to ineffective behaviors and close to abnormal.

Arrived to these heights of their personal and professional life, the occupational therapist is supposed to be totally adapted at social, family and cultural level. In general, he/she has formed his/her own family and fully exercises his/her professional activity (besides of activities characteristic of leisure, voluntary work, self-maintenance and cultural). These circumstances make that the identity is strengthened and that the person is a potent and effective therapeutic agent for other ones, given his/her wide vital and work experience and the acquired knowledge. Of course that we speak in general way, since each person has had his/her own experiences more or less intense and/or extensive. The therapist now uses in a very expert way the clinic reasoning; this reasoning is so rapid and intuitive that allows him/her to carry out his/her work routines without having to analyze and to prepare his/her interventions so much.

The expert professional, is also able to recognize and to value his/her own capacities and limitations. This aspect has been protagonist in the courses of practical or existential reflection developed for therapists and professionals of the health, to those ones mentioned in the previous point. Many are the aspects to meditate and about how they influence in the person's capacity to be

and to feel therapist, as well as to understand and to purge his/her particular style of making the therapy. The occupational therapy is art and science, and it is now, better than never before, when the professional is an ARTIST on capital letters, serving as inspiration and model for many professionals who are in previous stages. A test of it is when therapists of very diverse ages coincide in some course. The beginner ones miss the security and experience that provide the veteran ones and these last, take the feedback and revitalize with the young energy, the enthusiasm to learn and the new knowledge.

Nevertheless, a mature and expert therapist cannot only trust in his/her experience. It should continue being developed and worked with more and more. "Both the professional experience and personal, together with the active reflection about those experiences, are fundamental to transform into an expert" 6. The reflexive practices as well as the updating in theory and research concepts are the obligations and essential tasks for the expert occupational therapist. Now he/she is in situation of developing an occupational therapy focused on the client, on the occupation and based on the evidence.

On the other hand, the therapist in this stage, must control his/her emotional life appropriately, that allows him to face the problems with bigger security and serenity that in the previous stages. This capacity should serve him/her for possible situations transferable and counter-transferable with his/her patients, as well as in order to separate in an unquestionable and healthy way his/her personal life from his/her work life. Moreover, he/she has to be able to communicate efficient and clearly with the multidisciplinary team as well as with the families of the patients. Many of the interventions and modifications the therapist has to make directly in the environment are directly related with the family. The expert occupational therapist, since he/she has lived its family own experiences, usually has a correct perception of the reality (objectivity), which enables him to behave with bigger effectiveness and sense of responsibility.

Nevertheless, they are frequent the expert therapists that when meditating, they approach very punctual situations with those they feel in any way, "jumbled" emotionally and they need a necessary personal supervision. Very often, these situations are related with patient whose situation is very bad, and who ended up with suicide in many cases. The sorrow for the dead patient is a topic that unfortunately not all the multidisciplinary teams approach. When there has not been a space where to overturn the emotions and experiences generated by the act, the professional has to elaborate it as right he/she can and know.

Another emotional aspect that has a lot of importance is that the personal, vital experience can become in a double-edged sword. On one hand his/her experience helps the therapist to empathize too much with the patients, to understand their narratives, but, also, it can happen like Mattingly and Fleming⁸ establish that the therapist takes it for granted that some experience of those that happens to the patient was like some own experience already happened to him/herself. I would add that another possible risk is that the therapist, with the help of seeing so many and so many cases, cannot resist the temptation of classifying them in any way using the easy reasoning that " this patient is the same case as that other one whom I treated."

CONCLUSSION

The process of identity is expensive, complex and almost as long as the same life. Throughout the evolutionary different moments, the professionals face diverse difficulties and challenges. Throughout this process people learn and model themselves, constituting parallel their personal and professional identity. This way, the personnel and professional works are simultaneous levels on those the therapist should meditate and be in charge in order to consolidate his/her identity. As occupational therapists, our challenge is even bigger,

because we are agents and guides for change, for reorientation of occupational identities in people with damage in their personal identity, too. We have the enormous responsibility of not only feeding us with the necessary scientific knowledge, but also, of making it like people so that the "art" of applying the therapy is the genuine art that taught the pioneers and the one that the modern occupational therapy demands.

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