THE PROFESSION’S ETHOS AS A GUIDE TO PROFESSIONAL IDENTITY

LA ETHOS DE LA PROFESIÓN COMO UNA GUÍA PARA LA IDENTIDAD PROFESIONAL

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Quoted text:

Introduction
A profession’s ethos is thus an interlacing of sentiment, value, and thought that captures its character, conveys its genius, and manifests its spirit. An ethos carries beliefs so fundamental and sound that they endure, both transcending and supporting the particularities of shifting paradigms. Metaphors reveal its functions. An ethos serves as touchstone against which individuals strike their actions to know their worth. As inner voice, an ethos inspires individuals and calls them back when they stray too far. An ethos sets a profession’s course in ever-changing times. It is bare-bones plot in a heroic tale. Bold standard raised in a milling crowd, an ethos leads those with diverse roles and views to say, “That’s right!” The pull of an ethos is unbroken, sometimes undertow in currents less ideal. Its confluence of sentiment, value, and thought yields guiding
SUMMARY

Dictionary definitions of the term ethos include these: a person’s character or disposition; an individual’s moral nature; the characteristic spirit or prevailing sentiment of a group; the genius—that extraordinary and distinctive capacity or aptitude—of a people or institution; the guiding beliefs, standards, or ideals that pervade and characterize a group; the spirit that motivates the ideas or practices of a community; the complex of fundamental values that permeate or actuate major patterns of thought and behavior (Simpson & Weiner, 1989).

RESUMEN

Las definiciones del diccionario del término ethos, incluyen las siguientes: un carácter o disposición de la persona; la naturaleza moral de la persona; el espíritu característico o el sentimiento que prevalece de un grupo; el genio—esa extraordinaria y distintiva capacidad o actitud—de una persona o institución; el rector de creencias, normas, o ideales que impregnan y caracterizan un grupo; el espíritu que motiva las ideas o prácticas de una comunidad; el complejo de los valores fundamentales que impregnan o accionan las principales pautas de pensamiento y de comportamiento (Simpson & Weiner, 1989).

beliefs, both vital and lasting. In this way, the profession’s ethos might be seen as a guide to professional identity.

The Ethos of Occupational Therapy

Early supporters of the use of occupation, the founders of the Society for the Promotion of Occupational Therapy in the United States, and early occupational workers drew from their societal context and their experiences a common understanding: Occupation could help. In discussing the power of occupation and a therapy built around it, they reiterated central themes with visionary zeal. From their discussions, five beliefs emerged with guiding potential, each a confluence of sentiment, value, and thought. Each had the capacity to shape character, establish reputation, and carry the profession’s spirit across changing times. Each became part of our ethos. Because each ethological belief captures a distinct and equally important dimension of occupation or occupational therapy, each relates to the others existentially rather than sequentially or hierarchically. The end result is a complex of guiding beliefs, an ethos. It is this: (1) Time, place, and circumstance open paths to occupation; (2) occupation fosters dignity, competence, and health; (3) occupational therapy is a personal engagement; (4) caring and helping are vital to the work; and (5) effective practice is artistry and science. Taken together, these beliefs capture that which we profess—declare and affirm—in the world.
Within the 2005 Eleanor Clarke Slagle Lecture, I offered historical evidence for each of these early beliefs and, on the golden anniversary of the first Eleanor Clarke Slagle lecture delivered in 1955, followed each sampling with thoughts from Slagle lecturers who extended them across time (Peloquin, 2005). Consider the guiding potential of our ethos. Each belief is expressive, persuasive, and thoughtful. Each evokes the best of who we are; each plumbs the depth of what we do. Together they afford us this view of our professional identity: We are pathfinders. We enable occupations that heal. We co-create daily lives. We reach for hearts as well as hands. We are artists and scientists at once. This is our character; this is our genius; this is our spirit.

Ours is an ethos of engagement—a commitment to involve and occupy ourselves and be bound by mutual promise. Were we to distill the complex of our guiding beliefs into one brief account, our ethos might be this: Engagement for the sake of persons and their occupational natures. We engage so that others may also engage (Moyers, 1999).

**An Ethological Perspective on Current Professional Challenges**

Five reflections follow, each framing a current professional challenge in light of a guiding belief, and each a modern-day guideline for realizing our professional identity.

**We are Artists and Scientists**

Guided by the belief that effective practice is artistry and science, we are artists and scientists at once (Collins & Porras, 1994). Honoring our ethos, we strive toward integrative practices (Peloquin, 1994; Peloquin, 2002a). Gestalt visions grounded our ethos in its origins, images of whole persons possessed of mind, body and spirit; hands and hearts; physical and mental health. How can we reclaim those? For one, we can prompt the imagination that drives our science and art. Consider a beach scene. Sand and water come together at seaside, quite distinct but dynamically related. Seaside is because of land and ocean.
Grains of sand and waves of sea together make seaside. Seaside would not be if one were gone.


Add to such imagery the question asked by William James (1947) about whether we walk more essentially with the right or the left leg. Clearly we need both. And if we drift to polar thinking, we might consider ski poles, together lending support and balance rather than a vision of opposing actions. Can we not imagine co-supportive synergies drawn from science and art (Peloquin, 1994)? If so, we can see intervention, education, and inquiry as venues for the integration of competence and caring, professional purpose and personal choice, productivity and self-actualization, problem solving and collaboration, evidence and meaning. That perspective captures our ethos.

Even in the business world, James Collins and Jerry Porras (1994) endorsed the “genius of the and” noting that “a highly visionary group will aim to be distinctly yin and distinctly yang, both at the same time, all the time” (p. 45). When, in light of our ethos, we envision and enact our belief that effective practice is artistry and science, we realize a vital principle of our profession. And in doing so we reclaim our heart.

**We Are Pathfinders**

Guided by the belief that time, place, and circumstance open paths to occupation, we are pathfinders. But how can we find paths to occupation in
managed care and other disintegrating health care environments? We must first see overly managed systems as polarized. Management--skillful handling and control--is a distinct part of good care, but even in the realm of horse training, where the term management originated, experts suggest this broader view:

*We shall have to give up our inclination to control our horse by force. Instead we shall have to try to learn to respect the way that he wants to do things... And, instead of trying to impose on our particular animal the idea of what he should be able to achieve, we must first seek to learn what his capabilities really are...we shall have to add to our analytical capability an equal capacity for intuitive thought... Without this, our relationship with our horse will be one of spiritual warfare instead of harmony and beauty.* (Hassler, 1994, p. 16)

Strife occurs in health systems when control preempts care. Without harmonious relationships and respect for choice, management fails (Curtin, 2003). If we had galloping costs, unbridled excesses, and runaway procedures, these called for taming. But they did not warrant the split vision that has made an oxymoron of managed care (Peloquin, 1996). To see the split is to discern the missing care. And that discernment opens paths for its return.

In his reflections about educational systems, Gordon Davies (1991) asked a hard question of those on governing boards with control: “Are we helping to create an environment” he asked, “in which teaching and learning are honored and can flourish?” (p. 58). He saw in governance a pathfinding role. He heard a call to engender restlessness throughout the system, disturb complacency, and insist that rules be broken for the sake of learning (Davies, 1991). Likewise we might ask, “Are we making environments in which occupation can flourish?” Our activists, theorists, and innovators have asked. They have seen their pathfinding roles. They cause restlessness and disturb complacency as they challenge oppressive policy, affirm occupation as central, and make new practice sites—in clubhouses, workplaces, and community centers--for the sake of occupation.
Others make paths in quiet ways. Practitioners nest kindness, choice, and respect in approved interventions, working within payment rules to enhance performance. They foster dignity. Practitioners working in cramped spaces share big and courageous ideas that help clients remake their lives. They foster competence. Practitioners with huge caseloads in rushed circumstances craft cogent letters that extend occupational therapy. They foster health. Blocked as some may be from real occupation, they feel its steady pull. They heed its innermost call for dignity, competence, and health. They shape circumstances that hasten its return. Their efforts call to mind the words of Nkosi Johnson (Wooten, 2004), an African child and activist who died of AIDS (acquired immunodeficiency syndrome) at the age of 12: “Do all you can with what you have in the time you have in the place you are” (Norris, 2004).

If health care environments seem disintegrative, they are not unique. Educators face a press for what Kerry Walters (1991) called a vulcanization of students, a Spock-like penchant for rational problem-solving that stunts affective growth. Technologies proliferate, some putting interpersonal ken and harmony at risk. Through confluent models that foster learning with, about, and for whole persons, occupational therapy educators grow human potential and blaze trails to occupation (Peloquin, 2002b). Scholars face cut-throat trends to earn grant funds for institutional gain. Some are pushed toward discontinuous projects that neither flow from preferred inquiry nor grow the profession’s work (Mosey & Abreu, 1998). Through mindfulness, integrative methods, and a compass set on occupation, scholars make pathways back to our ethos (Abreu, Peloquin, & Ottenbacher, 1998).

Practitioners who honor occupation in disintegrating environments are pathfinders. When, challenges of all kinds notwithstanding, we affirm the belief that time, place, and circumstance open paths to occupation, we enact the courage of our profession. And we reclaim our heart.
We Reach for Hearts as Well as Hands

Guided by the belief that caring and helping are vital to our work, we reach for hearts as well as hands. Nine decades after he first said them, Hall’s (1915) words still ring clear: “Put yourself in that man’s place—imagine the despair” (p. viii). Depersonalized contexts in our times can fire such imagination and stoke our wills. Listen to Alfie Kohn (1990):

*No imported solution will dissolve our problems of dehumanization and coldness. No magical redemption from outside of human life will let us break through. The work that has to be done is work, but we are better equipped for it than we have been led to believe. To move ourselves beyond ourselves, we already have what is required. We are human and we have each other.* (pp. 267-8)

How are we equipped to move ourselves beyond ourselves? Stories from the autobiography of Ora Ruggles point to our capacity for empathy (Peloquin, 1995). At its core a disposition toward fellowship, empathy is a turning toward another not just to solve a problem but to care and to help. Ora’s turning enabled her reaching, made clear in her work with a girl named Edith (Peloquin, 1995).

Ora launched a program at Olive View sanatorium, knowing that a board of directors would inspect her work before granting space or funds. She first intervened with Edith, a teen with spinal tuberculosis so severe that she lay arched and prone in a Bradford Frame. Ora found a mirror that let Edith see her hands; she built her a worktable. Noting Edith’s flair for style and skill at sewing, she nurtured her potential as a dress designer and suggested doll clothes as a start. Edith produced fine work.

When county board members visited Edith, Ora heard a woman nicknamed “Hawkeye” regret time spent on such a “hopeless case.” Ora said, “No one is hopeless who wants to be helped, and there’s nobody in this place who wants to be helped more than Edith does. That’s why I’m working with her and that’s...
why I’m going to continue working with her.” She smiled at Edith. “And that’s why she’s going to get well” (p. 168). Hawkeye said that such sentiment was fine, but the board sought clear results.

Edith was to have shin bone segments grafted to her unstable spine. She yearned to pay for her surgery but doubted such income from doll clothes. Ora considered the situation. She made stylized figures from pipe cleaner and suggested that Edith clothe and group these to show rhythm and life. Edith caught on, creating ballets, skaters on a pond. Other patients joined in, making backgrounds and bases. The doll clothes sold readily in Los Angeles, and Edith’s share of the profits funded her surgery.

At the next visit of the board, a physician reviewed Ora’s work, and even Hawkeye was impressed. They approved a workshop that Ora helped design. Edith was discharged. She attended a fashion design school, became a well-known dress designer, supported her family, and funded patients at Olive View. The story is a tribute to Edith’s spirit. It tells of Ora’s empathy and good management sense.

John Gums (1994) would applaud the work of Ruggles, whose reaching for hearts and hands spread fellowship broadly. Gums (1994) said:

> Every human being is born with the capacity to empathize. Most medical professionals, through their training, are taught to squeeze out that natural ability. Rediscovering it later in our professional life is a goal we should all have. Evidence suggests that to do so, emphasis must be placed on consideration of human life. (p. 251)

The rediscovery of empathy is not an add-on task to juggle alongside others but more like the act of a cyclist turning the wheels of competence and caring at once. Elsewhere I’ve suggested that empathy is a considered way of being brought to our doing, no matter what that doing is (Peloquin, 1995). Being present to another in time is not the same as having lots of time. Consider interactions during checkout at a grocery store. In a few minutes, some
cashiers forge real connections. We have much more time than most cashiers, and we connect well through our doing. And if being present admittedly takes energy, it paradoxically restores it, unlike the drain toward emptiness of de-personalization.

When, in light of our ethos, we affirm to ourselves and to others that caring and helping are vital to our work, when we empathically dispose ourselves toward that end, we share the ardor of the profession. In doing so, we reclaim the profession’s heart.

**We Co-create Daily Lives**

Guided by the belief that occupational therapy is a personal engagement, we co-create daily lives. But how can we engage in co-creation when so much pulls us elsewhere? Media messages say that a clock has filled our souls. We wear time-machines strapped to our bodies. We’re out of sorts without them. We tick with the many things that we must do. We stay wound up and out of touch with ourselves and others; we buzz within. We race with time, hoping to beat it. While seeking a control that eludes us, we turn from healthy rhythms of occupation and relationship. We loathe the idea of getting behind, or worse, of getting worn, ugly, and old. We have nearly forgotten what it means to engage with the world and connect with others (Peloquin, 1990).

If we hope to engage—to involve and occupy ourselves and others and be bound by mutual promise—we must expand our views of time. Consider the book *Cheaper by the Dozen*, about Frank Gilbreth, honorary member of the Society for the Promotion of Occupational Therapy. Gilbreth’s son described his father’s passion for efficiency. Fully clothed and sitting on the carpet, Gilbreth taught his 12 children the most expedient way to bathe while extending the life of the soap. If we see time only as a commodity, we have split his larger vision. Gilbreth’s son, Frank Jr. (1948) shared what we have missed:

_Someone once asked Dad: “But what do you want to save time for? What are you going to do with it?”_
For work, if you love that best, said Dad. “For education, for beauty, for art, for pleasure.”

He looked over the top of his pince-nez. “For mumblety-peg if that’s where your heart lies.” (p. 237)

We mark time; we count units of productivity because we must. But only if we engage with the world will we find where our hearts lie. And only if we engage with others can we help them find what they love best.

Most media messages that commodify time differ from a sense of time's wonder, like that of our forebears, found in the story of The Velveteen Rabbit (Williams, 1978). The Rabbit, new to a young boy's nursery, asked the Skin Horse, a kindly older toy, a question that we too ask:

- “What is REAL?” asked the Rabbit one day... “Does it mean having things that buzz inside you and a stick-out handle?
- “Real is not how you are made, said the Skin Horse. “It’s a thing that happens to you. When a child loves you, then you become Real.”
- “Does it hurt?” asked the rabbit.
- “Sometimes,” said the Skin Horse, for he was always truthful. “When you are Real you don't mind being hurt.”
- “Does it happen all at once, like being wound up,” he asked, “or bit by bit?
- It doesn’t happen all at once,” said the Skin Horse. “You become. It takes a long time. That’s why it doesn’t often happen to people who break easily, or have sharp edges, or who have to be carefully kept. Generally, by the time you are Real, most of your hair has been loved off, and your eyes drop out and you get loose joints and are very shabby. But these things don’t matter at all, because once you are Real you can’t be ugly, except to people who don’t understand. (pp. 16-17)
When engaged and real, Yerxa (1967) said that “we feel, we encounter, we take time, we listen and we are ourselves” (p. 8). A modern-day story reveals such engagement.

I sustained a severe, complicated injury to my right dominant hand... I was prescribed occupational therapy treatment... As at many previous sessions, I was seated across from Karen (the occupational therapist), prepared to begin my treatment. However, this time was different. I gazed down at my right hand resting on the tabletop and suddenly regarded it in a totally different light than ever before—I became aware that I was permanently disfigured... Overwhelmed by this realization, tears welled in my eyes, and I whispered, “It’s so ugly.” Without missing a beat, Karen ... explained that my emotions were a normal reaction to my injury... reassured me that this was a normal response and that we could discuss the process during therapy sessions... she assured me that I wasn’t alone; we would work through it together. When Karen finished, I was utterly speechless. Karen had given voice to my despair... For the first time since the accident, I felt as if someone could truly empathize with my plight. (Ponsolle-Mays, 2003, pp. 246-7).

The storyteller, Michelle Ponsolle-Mays (2003), later became an occupational therapist. She wrote, “And when I now use my right hand to help someone with an activity, what I see is no longer ugly—it is my personal swan” (p. 247). To the extent that we engage with others so that they can create their daily lives, we become real.

As part of our mutual promise, we can also engage as professional citizens, speaking for persons and their occupational natures. That voice—raised to secure meaningful pursuits for all--can be the defining character of our organizations (Sullivan, 1999). Professional citizenship will balance market forces if we hold what Harold Perkin (1989) called “the professional social ideal,” a commitment to society as a fellowship rather than only as a
marketplace in which persons become consumers and profit matters most (Peloquin, 1996; Peloquin, 1997b). Only then will we integrate social justice and economic solvency to shape real reform (Perkin, 1989). Only then will profit support real profession.

When, in light of our ethos, we commit to the personal engagement of occupational therapy, when we engage with others so that they might seize their daily lives, we practice real occupational therapy. We share the innermost core of the profession, and we reclaim our heart.

**We Enable Occupations that Heal**

Guided by the belief that occupation fosters dignity, competence, and health, we enable occupations that heal. When asked to see what we do as performance that fixes dysfunction, we might recall Meyer's (1922) vision of our dual beacon lights of performance and opportunity. Ours is a unique perspective. We see everyday activities as a making of lives and worlds, a broader and deeper view than that of mere performance or function, and one steeped in opportunity. Philosopher Elaine Scarry (1985) noted the worldmaking function of persons:

> As one maneuvers each day through the realm of tablecloths, dishes, potted plants, ideological structures, automobiles, newspapers, ideas about families, streetlights, languages, city parks, one does not at each moment actively perceive the objects as humanly made; but if one for any reason stops and thinks about their origins, one can with varying degrees of ease recognize that they have human makers. (p. 312)

The image of someone in the act of making is one in which human being—its character, heart, and spirit—flows into personal doing. The difference between doing and making is one of substance and not semantic. Human making is a creation, our humane engagement a co-creation (Peloquin, 1997a).
Consider activities of daily living. We name hair care grooming, but we can see it as an act of making oneself presentable, attractive, or even likeable. What we call cooking we could easily call the making of a meal nested within largermakings--of hearth, home, or tradition. What we call work is more deeply the making of a living, a family, a reputation, a community, a society. Wherever it falls in Abraham Maslow’s (1970) scheme of need, health, and hope, we see human making in daily tasks (Peloquin, 1997a). We see occupations as vital links to dignity, competence, and health. That perspective can lift our clever line, *Occupational therapy, skills for the job of living*, to higher and more healing ground where living is more than a job. And from there we might say, *Occupational therapy, making daily lives* (Peloquin, 2002a). That perspective captures our ethos.

In her poem, Janet Petersen (1976) casts even simple occupations as expressions of the human spirit:

> There is a shouting SPIRIT deep inside me:
> TAKE CLAY. It cries,
> TAKE PEN AND INK,
> TAKE FLOUR AND WATER,
> TAKE A SCRUB BRUSH,
> TAKE A YELLOW CRAYON
> TAKE ANOTHER’S HAND-
> AND WITH ALL THESE SAY YOU,
> SAY LOVING.

Through occupations such as these, the human spirit emerges, manifesting itself in small and large ways. Its emergence graces photographs of individuals seized by occupation (Menashe, 1980).

Practice stories revere this spirit. Therapist Betty Baer (2003) introduced us to a Vietnam veteran with a high-level spinal cord injury from a remote part of Texas; he called himself a “Mountain Man.” Betty wrote:
J. was self-conscious about the hole left in his throat from the tracheotomy. He thought that an Indian choker necklace would be a good way to cover up the hole. Unfortunately, he was unable to make this himself, even with the best of OT compensatory techniques and gadgets. Since I had a little experience with beadwork, we decided that he would create the design and I would be his “hands” - following his directions to produce the choker necklace. We thought this would be a good experience. It was important for J. to direct his care—why not direct his creativity as well?

This was a big challenge for both of us. It was difficult for him to put into words the steps of the activity his hands knew how to do so well. It was challenging for me to follow his instructions, and not just improvise on the knowledge of beadwork that I already possessed.

To our mutual amazement, the choker . . . looked great. J. wore it with pride and received many compliments. This activity not only transformed a handful of beads into a necklace, but it also transformed J.’s role from a passive patient to active teacher. It was a truly wonderful OT/patient experience . . . one I will never forget. (p. 5)

When, in spite of constraints, practitioners make their interventions meaningful, lively, and even fun, they infuse therapy’s purposive aims with its capacity to encourage and inspire. Acting on the belief that occupation fosters dignity, competence, and health, we embrace the spirit of the profession. As we enable healing occupations, we reclaim our heart.

**Conclusion**

We can stand on the rock that is our ethos and from there proclaim our view: Time, place, and circumstance open paths to occupation. Occupation fosters dignity, competence, and health. Occupational therapy is a personal...
engagement. Caring and helping are vital to the work. Effective practice is artistry and science. Our profession takes this stand for the sake of persons and their occupational natures. We engage—we involve and occupy ourselves and commit to mutual promise—so that others may also engage. This is our professional identity.

The ethos of occupational therapy restores our clear-sightedness so that we see in ourselves what is essential: We are pathfinders. We enable occupations that heal. We co-create daily lives. We reach for hearts as well as hands. We are artists and scientists at once. If we discern this in ourselves, if we act on this understanding every day, we will advance into the future embracing our ethos of engagement. And we will have reclaimed a magnificent professional identity.

**Acknowledgment**: Excerpts from the 2005 Eleanor Clarke Slagle Lecture:

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