The collaborative relationship between teachers and occupational therapists in junior primary mainstream schools

Introduction:
Occupational therapy services have increasingly moved into mainstream schools in recent years. This has led to therapists recognizing the need to work in a closer relationship with teachers in order to facilitate the understanding of the role of occupational therapy in educational environments. Currently in South Africa, the same trend is being adopted and there is an increase of occupational therapists working in mainstream schools. In most adverts or school open days, principals often indicate that their school has an “in-house” occupational therapist. According to Dunn, occupational therapy services were initially offered in special schools but this changed due to changes in views regarding approaches to preventing learning problems. The introduction of the White Paper 6 on Building an Inclusive Education and Training System has also meant that the employment and placement of occupational therapists and other health professions in mainstream schools is becoming a reality.

According to Vincent, Stewart and Harrison, a number of studies have concurred that collaboration between these health professionals and teachers is necessary to improve the outcomes of the learners. This collaboration between different disciplines is necessary to effectively address the complex needs of learners. The study conducted by Case-Smith and Cable found that occupational therapists play a consultation role in schools, which allows them to spend time in the classroom and to help in the accommodations for the changing needs of the learner. Since learners spend most of the school day in the classroom, teachers are in a better position to identify learners who require special attention. Hence the collaboration between teachers and occupational therapists is important for appropriate referrals to be implemented and efficient intervention to occur. However in some cases not all teachers are au fait with the role of occupational therapy within the school setting and therefore learners are deprived of the benefits of occupational therapy intervention.

Collaborative team practices are considered important for services to learners and are beginning to be used within classroom settings and in team meetings. In South Africa however, the collaboration between occupational therapists and teachers is a relatively new practice and no local literature could be found reporting on studies in this regard; description of relevant models; or how to evaluate this collaboration.

The researchers in this study aimed to investigate the collaborative relationship between the teachers and occupational therapists in mainstream schools. Additionally the researchers explored the obstacles that hindered this relationship and also identified ways of overcoming these obstacles.

Literature Review
According to the White Paper 6, “inclusion” refers to supporting all learners and educators so that the full range of learning needs is met. “Mainstreaming” refers to giving learners with special needs extra support so that they are integrated into a ‘normal’ classroom routine and the focus is on making changes so that the learner “fits in” rather than excluding him.

Occupational therapists have many skills to offer in mainstream school settings, which can impact on the educational outcomes of the learners. According to Bell and Burch, one of the factors that led to the introduction of occupational therapists to mainstream schools was the increasing number of learners with physical, emotional or cognitive difficulties that were being accommodated in main stream schools. This resulted in teachers increasingly searching for assistance regarding ways to overcome the challenges posed by some learners with special needs in the classroom.

Members of a collaborative team offer different perspectives and contribute to the development of strategies that will benefit the learner, family, and teachers, emphasising the importance of the collective input from both professional groups for intervention to be successful.

Communication has been identified as a vital factor in ensuring the success of therapy within a school setting. When occupational therapists and teachers work together in a collaborative manner, effective communication strategies should be employed to ensure that their goals and experiences with the learner are shared. Both formal and informal interactions are crucial to plan and execute an integrated intervention programme.

Collaboration brings about improvement in the educational outcomes of learners. According to Case-Smith and Rogers, consensus is vital when formulating goals and plans for educational programmes. When this consensus is not achieved conflict develops within the relationship and this can be destructive to the implementation of a learner’s programme.
Mukherjee, Lightfoot and Sloper\(^\text{10}\) identified the following factors as being barriers to effective collaboration:

- Teachers are unsure regarding which professionals to approach to obtain information and advice.
- Contact between teachers and the health professional is limited.
- Health professionals tend to not share information with teachers on the grounds of confidentiality.
- Some health professionals do not perceive the teachers as their partners in caring for learners.

Teachers may also have a limited awareness of the role of occupational therapy within the school\(^\text{11}\). This, together with limited resources, may affect the level of access that a learner who experiences difficulties has to occupational therapy services. A poor understanding of the profession contributes to poor collaboration, as each profession does not understand the way in which each contributes to the educational goals of the learner.

The purpose of this study was therefore to investigate the collaborative relationship between the teachers and occupational therapists; to explore the obstacles that hinder this relationship; and to discover ways of overcoming these obstacles.

**Methods**

A qualitative approach was used to explore the relationship between teachers and occupational therapists.

**Participants and sampling:**

A purposive sample was chosen within the eThekwini region. The sample was chosen according to the following inclusion criteria:

- Occupational therapists who had to be working at a school or contracted by the school.
- The schools had to be mainstream schools in the eThekwini region.
- Only junior primary teachers with learners receiving occupational therapy.

Schools within the Ethekwini region were contacted in order to establish whether or not they met the criteria of the study and if they did, the researchers requested the principal’s contact details. The principals of the schools were then contacted telephonically and an information letter was faxed in order to obtain permission to conduct the study using participants from their schools. Telephonic consent was obtained from the occupational therapists and teachers to participate in the study and they later signed the consent form prior to participating in the focus group interview.

A total number of 10 teachers and occupational therapists from three schools in Durban formed part of this study. They were all first language English speakers and were from the formerly model C schools in which occupational therapists worked part time. These teachers and occupational therapists were all from the same three schools. Their working experience was not ascertained.

**Data Collection and analysis**

Two focus group interviews as well as two individual interviews were conducted by the researchers. These interviews followed the format and questions given in Appendix I. The first focus group consisted of five female occupational therapists who worked with learners in mainstream schools. The second focus group consisted of three female teachers working in mainstream schools that have “in-house” occupational therapists. These focus groups enabled the participants to reflect and build on other group members’ responses\(^\text{12}\). The individual interviews were conducted on a separate day after the focus group interviews at the schools where the professionals were based. One interview was with a teacher and the other one with an occupational therapist. They were not part of the respective focus groups. The individual interviews allowed for sharing of personal experiences and also yielded more in-depth information\(^\text{12}\).

The focus group interviews and individual interviews were audio taped and later transcribed verbatim. All the data were independently analysed by each researcher using generic steps as outlined by Creswell\(^\text{13}\). Themes and sub-themes were identified through reading and re-reading the transcriptions and comparing what was said against any non-verbal cues of participants that were observed. Comparison and reflection amongst the researchers were done before arriving at common general categories. The analysed data from both focus groups and interviews were compared to identify similarities or differences in the data. Peer debriefing was conducted to confirm the interpretations with the research supervisor.

**Credibility and trustworthiness**

In order to ensure credibility, triangulation\(^\text{14}\) of research methods was incorporated into the study as multiple methods of data collection were used, namely two focus group interviews and two individual interviews.

In addition, triangulation of researchers\(^\text{14}\) was implemented as three research members were involved in the study and data were initially analysed individually and then collectively allowing for comparison of interpretation of data before reaching conclusions. Finally, peer debriefing with the research supervisor was conducted to confirm the interpretations.

**Ethical issues**

Ethical approval was received from the UKZN Faculty of Health Sciences Research Ethics Committee. Informed consent was gained from both set of professionals. Teachers and occupational therapists were assured that the information they provided would be used confidentially without reference to their identity and participants remained anonymous in all written or verbal presentation of the data.

**Findings**

Five themes emerged from the study and they are depicted in Table 1. The primary themes were: methods of collaboration, benefits of collaboration, attitudes, obstacles in the collaborative relationship and methods of overcoming obstacles. Methods of collaboration were sub-divided into formal and informal methods; attitudes were subdivided into occupational therapists’ attitudes towards teachers and teachers’ attitudes towards occupational therapists. Obstacles were subdivided into time, knowledge/awareness and school protocol.

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**Theme 1: Methods of collaboration**

Formal methods of collaboration were not used consistently. Meetings were not formally scheduled and occurred only in special cases. For example, the staff met when planning for referral of a learner to a remedial school. Some of the teachers and occupational therapists mentioned that due to limited time available for collaboration, informal methods had to be established to facilitate communication with the teachers. These included methods such as communicating through messages and attaching videos of a learner...
engaged in tasks, taken using a cell phone, sending informal notes or discussing learners during tea breaks. Although these methods are informal it was thought that they were helpful in communicating information about the learners.

Theme 2: Benefits of collaboration on learners’ performance

The occupational therapists stated that through collaboration with the teachers they were able to adjust the aims of the intervention and evaluate the learners’ progress at any given time. The occupational therapists felt that collaboration with the teachers allowed them to confirm their assessment information. “I think that collaboration is vital and I think you can’t have any downside to that.”

In addition, both professionals stated that through such interaction, the teachers’ knowledge of occupational therapy services would increase and the teachers would become better equipped to identify learners that would benefit from occupational therapy.

Theme 3: Attitudes

Sub theme 1: Occupational therapists’ attitudes towards teachers

The occupational therapists explained that the majority of the teachers that they came into contact with were accommodating, understanding and flexible when sending the learners for occupational therapy. However in some instances the occupational therapists found that some of the teachers were strict with regards to the learners being taken for therapy during academic time. The teachers felt that the learner would be missing out on lessons and the learner would have to make time to catch up. This often meant that the teachers would have to make time to accommodate the missed lesson and adapt their time table.

Sub theme 2: Attitudes of teachers towards occupational therapists

While most teachers viewed occupational therapy as an extra support system in the school, one teacher stated that it was difficult communicating with an occupational therapist who was not employed by the school but worked on a private basis. In this case, the occupational therapist was viewed as a professional using the school premises to perform treatment but not necessarily part of the school system as a co-worker. This therefore, made it a bit uncomfortable approaching them on a regular basis. This was evident when one teacher stated “we don’t take up much of their time trying to talk because she is not employed by the school, she’s not really like a colleague, she’s more like an outside person working on our premises if you know what I mean and then also maybe she doesn’t feel it’s her place to be telling us.”

Teachers were in agreement that they would be more comfortable approaching an occupational therapist employed by the school as opposed to working in a school on a private or part time basis.

Theme 4: Obstacles in the collaborative relationship

The following obstacles were revealed in both the focus groups and individual interviews with the teachers and occupational therapists.

Sub theme 1: Time limitations

Both sets of professionals identified time as a barrier to communication. “Well the first barrier will definitely be time… time is a huge factor”

 Teachers had full teaching schedules and occupational therapists had set therapy times for the learners which made it difficult for the two sets of professionals to meet and communicate. As the occupational therapists were working on a private basis, the teachers found it difficult to contact them. Teachers felt that the occupational therapists’ intervention times clashed with their own timetables thus making it difficult to arrange time to meet.

Sub theme 2: Knowledge

Many teachers experienced difficulty communicating their observations of the learners to the occupational therapist as they felt that they had a limited understanding of the terminology used by occupational therapists. One teacher stated “…it’s almost as if you (are) using different languages because you’ve got different terminology for things …”

They stated that they were not specially trained to identify learners with difficulties who would benefit from occupational therapy intervention. They felt that more collaboration with the occupational therapists was necessary to increase their knowledge to identify problems with the learners.

The occupational therapists commented that while they had noted that teachers were becoming more aware of their contribution of occupational therapy in a school setting, there was still a gap in teacher ability to identify learners with barriers to learning.

Theme 5: Methods of overcoming obstacles

Both sets of professionals felt that more time should be dedicated to meetings so that collaboration and communication between the professions could increase. Teachers felt that it was necessary for schools to implement fixed time tables for communication with occupational therapists. In addition the occupational therapists felt that it was beneficial to have an occupational therapist permanently employed by the school as opposed to working in a school on a private or part time basis.

The occupational therapists believed that increasing the frequency of in-service training would create more awareness and in turn increase the number of referrals for those learners who might require occupational therapy. The teachers also emphasised that in-service training would improve their knowledge and help them identify problems displayed by the learners. Another method suggested was to provide teachers with a checklist designed by an occupational therapist with regards to problems the learner is experiencing and collaborate in this indirect way.

Discussion and implications for occupational therapy practice

It was clearly evident from the interviews that collaboration has an impact on identifying and managing learners with problems. This was in support of literature read which highlighted that successful collaboration is required in the school setting for effective intervention to occur in the educational environment. Effective communication was perceived to allow the two professions to report to each other regarding the learners’ academic progress, allowing them to work together towards a common goal. Owing to obstacles experienced in the collaboration, informal methods of communication were utilised more frequently. Formal methods were perceived as being more effective in enhancing collaboration and they therefore need to be scheduled on the school’s timetable. This is also necessary as both professionals were of the view that time for collaboration was limited. This is supported by Prigg who as well as Bose and Hinojosa who stated that one of the obstacles encountered was limited time.

With regards to attitudes towards each other, the data revealed that both positive and negative attitudes were present. However the teachers agreed that the occupational therapists were a major support system for both them and the learners with learning difficulties. Most of the occupational therapists also agreed that the teachers were grateful for their assistance and thus willing to give classroom time to the learners to attend occupational therapy. Most teachers were flexible and accommodated the occupational therapist by shuffling the time table or re-scheduling lessons so the learner could attend therapy. However there were a few teachers that were stringent about teaching times and were not willing to allow learners to attend therapy during classroom time. Some of the occupational therapists attributed this attitude to limited knowledge about occupational therapy. Some teachers felt that occupational therapists were concerned with only the requirements of their own private work. Thus they felt that an occupational therapist employed by the school would be easier to approach as they will be seen as part of the staff.
The teachers’ poor understanding of the occupational therapy profession is a definite barrier to collaboration. Although there has been an increase in knowledge, both sets of professionals agreed that in-service training for teachers would be beneficial to overcome poor knowledge about occupational therapy. This would make collaboration easier and thus create a better understanding between the teachers and occupational therapists.

Conclusions
It is recommended that occupational therapists must advocate for their role and create a greater awareness of their profession within a school environment. Both teachers and occupational therapists need to create opportunities for communication and they need to also create alternative methods to improve communication. Communication can be improved by employing the following suggestions:

- Scheduling specific times for professionals to meet and discuss all learners receiving intervention.
- Collaboration through progress reports should be done as a standard procedure.
- In-service training for teachers on the role of occupational therapy needs to be conducted in all mainstream schools.

This study needs to be repeated on a wider scale in order to explore collaboration between teachers and occupational therapists in greater detail. The results of this study could be used to improve collaboration between the teachers and occupational therapists that are currently working together. It is also estimated that it will contribute to creating awareness for the need for employment of occupational therapists in mainstream schools.

References
15. Prigg A. Experiences and perceived roles of occupational therapists working with children with special needs during transition to school.

APPENDIX 1: FOCUS GROUP AND INTERVIEW QUESTIONS

Focus group questions for teachers
1. What do you perceive as being your role in a mainstream school setting?
2. How do you receive your referrals?
3. What is the teacher’s role in your intervention with learners?
4. Does the time spent in occupational therapy have a positive or negative impact on a learner’s participation in the classroom? Explain why?
5. Once the learner is receiving occupational therapy, do you have an indication of their progress? How?
6. What challenges do you encounter with regards to communicating with the occupational therapist?
7. What challenges do you think can be done to improve collaboration between the teacher and an occupational therapist?

Focus group questions for occupational therapists
1. What do you perceive to be the role of occupational therapists in your school?
2. How do you refer your learners to the occupational therapist?
3. Describe the effectiveness of your referral system.
4. In your opinion, what needs to be done to improve the collaboration between the teachers and occupational therapists?
5. What hinders or supports collaboration with the occupational therapist?

Interview Questions: teacher
1. How do you refer your learners to occupational therapists and is this method effective?
2. Why would you refer a learner to an occupational therapist?
3. Does the time spent in occupational therapy have a positive or negative impact on a learner’s participation in the classroom? Explain why?
4. Once the learner is receiving occupational therapy, do you have an indication of their progress? How?
5. What challenges do you encounter with regards to communicating with the occupational therapist?
6. What do you think can be done to improve collaboration between the teacher and an occupational therapist?

Interview questions: occupational therapist
1. How do you usually get your referrals?
2. Once a child is receiving occupational therapy, do you still communicate with the teacher? If yes, how? If no, why?
3. In your experience, what are the teachers’ feelings about sending learners for occupational therapy during school hours?
4. What challenges do you encounter with regards to communicating with teachers?
5. How can these challenges be overcome?

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