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**Life Skill Needs of Occupational Therapy Assistant Students: Perceptions of Instructors, Preceptors, Graduates and Current Students**

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Abstract
Life skills are the basic skills required to function in everyday life. Occupational therapy assistant (OTA) students may struggle with life skills, and as a result experience challenges in academics and practicum. The purpose of this phase of a multiphase study was to identify the life skill needs of OTA students from multiple perspectives. This study used a pragmatic qualitative design. Students in the second year of a 2-year therapy assistant diploma program, graduates, instructors, and preceptors participated in interviews or focus groups to discuss OTA students’ life skill needs. Interviews and focus groups were recorded and transcribed. Applied thematic analysis was used to analyze the interview and focus group data and draw conclusions. Common themes were identified: contributors to student success; impact of students’ life skills on clinical encounters; and life skills training needs. These themes were identified across all participant groups. Findings suggest that OTA students with lower confidence or abilities in life skills may also have lower confidence and success in clinical encounters. Life skills training tailored to OTA students may help students develop foundational skills to enhance their confidence and competence in relevant life skill areas.

Keywords
College students, life skills, independent living skills, daily living skills, occupational therapy assistant

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Life Skill Needs of Occupational Therapy Assistant Students: Perceptions of Instructors, Preceptors, Graduates and Current Students

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ABSTRACT
Life skills are the basic skills required to function in everyday life. Occupational therapy assistant (OTA) students may struggle with life skills, and as a result experience challenges in academics and practicum. The purpose of this phase of a multiphase study was to identify the life skill needs of OTA students from multiple perspectives. This study used a pragmatic qualitative design. Students in the second year of a 2-year therapy assistant diploma program, graduates, instructors, and preceptors participated in interviews or focus groups to discuss OTA students’ life skill needs. Interviews and focus groups were recorded and transcribed. Applied thematic analysis was used to analyze the interview and focus group data and draw conclusions. Common themes were identified: contributors to student success; impact of students’ life skills on clinical encounters; and life skills training needs. These themes were identified across all participant groups. Findings suggest that OTA students with lower confidence or abilities in life skills may also have lower confidence and success in clinical encounters. Life skills training tailored to OTA students may help students develop foundational skills to enhance their confidence and competence in relevant life skill areas.
Introduction
College students often struggle with basic life skills such as meal preparation and managing finances. Difficulty with life skills can lead to challenges with academic performance, coping with stress, practicum performance, and employability (Aguilar & Aguilar, 2018; Currie et al., 2012; Gibbons et al., 2019; Picklesimer et al., 1998). In turn, occupational therapy assistant (OTA) students may face particular challenges if they lack experience or competence in these areas themselves given that they are expected to work on life skills with clients.

Background
Life skills are necessary to successfully function in day-to-day adult life (Rubin et al., 2003) and include activities-of-daily living (ADL), instrumental activities of daily living (IADL), problem-solving, and other foundational abilities such as interpersonal, intellectual, and emotional skills (Abaoğlu et al., 2017). ADL are basic self-care activities such as getting dressed and eating (Spector et al., 1987). IADL are more complex activities, such as planning and cooking meals (Spector et al., 1987), money management (Moore et al., 2007), health management and vocational skills (Rubin et al., 2003). IADL require executive functioning and the ability to adapt to one’s environment (Spector et al., 1987).

First year college students often have difficulty adjusting to the post-secondary environment and culture (Hunter, 2006). The new responsibilities faced by college students can be overwhelming (Stupnisky et al., 2008) and difficulty with life skills can lead to challenges with academic performance, coping with stress, practicum performance, and employability (Aguilar & Aguilar, 2018; Currie et al., 2012; Gibbons et al., 2019; Picklesimer et al., 1998). Not surprisingly, students with better life skills do better in college (Currie et al., 2012; El Ansari & Stock, 2010; Schoon & Morrison Gutman, 2013).

Therapy assistant education programs in Canada may have different names referring to the same role; for example, OTA/PTA (occupational therapy assistant and physiotherapy assistant), rehabilitation therapy assistant, or therapy assistant, or therapist assistant. While programs may also include skills related to other disciplines such as recreation therapy, speech language pathology, and/or audiology, the majority of Canadian therapy assistant programs focus on occupational therapy and physiotherapy. Students are trained in both OTA and PTA roles in typically 2-year diploma programs, and upon graduation are prepared to work as OTAs, PTAs, or rehabilitation assistants. The umbrella term ‘therapy assistant’ is used to refer to workers in any of these disciplines; however, this study will examine life skills as they apply to the role of OTA.

Like other college students, OTA students may have difficulty transitioning to the college environment, and those who struggle with life skills may face particular academic challenges. OTA work includes enabling occupation in self-care, productivity, and leisure (OTA & PTA EAP, 2018), which may involve helping clients to gain skills in ADL.
or IADL. To effectively do their jobs, OTAs must be able to perform ADL and IADL, and must also possess the necessary confidence, competence, and problem-solving skills to work with clients in these areas.

Fortunately, evidence suggests that life skills are learned through experience and can be taught (Brooks, 1984; Chakra, 2016; Pellegrino, 2012; Picklesimer et al., 1998; UNICEF et al., 2012). Life skills training can lead to graduates who are better prepared for adult life and the workforce (Avci & Kamer, 2018). Given the unique nature of OTA students’ work, students in OTA programs may have additional life skill needs beyond those of other college students. OTA students may experience personal challenges if they lack life skills in IADL, but they may also face professional challenges. For example, if an OTA student lacks competence in preparing meals, the student may struggle with their own health maintenance and may also have difficulty working with clients on meal preparation. Thus, the potential impacts of life skills deficits may impact these students' ability to succeed in their chosen field of study.

Methods
This study used a pragmatic qualitative methodology. As an approach to qualitative inquiry, pragmatism aims to solve real-world problems by finding practical solutions (Creswell & Creswell, 2018). A pragmatic approach considers the context of the problem and focuses on the intended consequences of the research (Creswell & Creswell, 2018; Mertens, 2014). For this study, the intended consequence of the research was to provide foundational information as the first phase of a larger research project that explored the development and evaluation of online life skills training modules.

Using a pragmatic qualitative design, this study focused on interviewees' perceptions regarding the following questions:

- What are the most significant life skill challenges for OTA students?
- What are the life skill areas that most contribute to OTA students’ personal and professional success?
- What life skills training topics may be most relevant to enhance OTA students’ confidence or competence in skills required for work as an OTA?

Participants and Recruitment
To learn about OTA students’ life skill needs, the research team determined that it was essential to involve OTA students in this study. Second year OTA students would be nearing program completion, and therefore could comment on their experiences throughout their studies.

Because students may not always realize what they do not know, the research team also identified other stakeholders who worked with or had experience as OTA students. Therapy assistant graduates with experience in the OTA role could comment on their experiences and needs while in school, and because of their career experience, graduates may also be able to share insight into life skills that are important for OTAs in the workplace. Instructors in therapy assistant diploma programs have worked with OTA
student cohorts and have had the opportunity to teach and evaluate multiple students. Instructors may have unique insights about the differences in life skills of stronger and weaker students. Instructors also have knowledge of life skill areas that are covered (or are lacking) in program curricula. Preceptors who have mentored OTA students during practicum placements are aware of student life skill needs in practical settings and would be able to comment on life skills that impact student success in practicum placements.

The recruitment methods and participation criteria for each of the four participant groups are summarized in Table 1.

**Table 1**

**Study Participant Recruitment**

<table>
<thead>
<tr>
<th>Participant group</th>
<th>Recruitment methods</th>
<th>Eligibility criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students</td>
<td>Email invitations were sent to second year students of therapy assistant programs in Alberta (other than Red Deer College where the principal investigator works) and a project partner institution in Ontario.</td>
<td>Enrolled in the second year of a 2-year therapy assistant diploma program.</td>
</tr>
<tr>
<td>Graduates</td>
<td>Email invitation sent via the Therapy Assistant Association of Alberta and personal contact lists.</td>
<td>(a) Graduated from a therapy assistant diploma program within the last 1 - 10 years; (b) has a diploma as a therapy assistant, rehabilitation assistant, OTA and PTA, or OTA; and (c) has worked as a therapy assistant, rehabilitation assistant, OTA and PTA, or OTA within the last year or at least 500 hours in the past 5 years, with experience in OTA roles.</td>
</tr>
<tr>
<td>Preceptors</td>
<td>Email invitation sent to contact lists available through the Canadian OTA and PTA Educators Council (COPEC) and personal contact lists.</td>
<td>(a) Has worked with 3 or more OTA students as a preceptor (OT) or supervisor (TA); (b) has worked with at least 1 student in the past 2 years; and (c) works in a practice area where life skills are relevant.</td>
</tr>
<tr>
<td>Instructors</td>
<td>Email invitation sent to contact lists available through the Canadian OTA and PTA Educators Council (COPEC) and personal contact lists.</td>
<td>(a) Currently teaches in a therapy assistant program or has taught at least one class in a therapy assistant program within the past 3 years; and (b) is familiar with the life skills needed for work as an OTA.</td>
</tr>
</tbody>
</table>
Ethics
This study was approved for ethical compliance by the General Research Ethics board at Queen’s University and the Red Deer College Research Ethics Board. All participants provided informed consent to participate in this research, and details have been anonymized to protect participant identity.

Data Collection
Data were collected by video-conferencing technology and using structured interviews (preceptors and instructors) and focus groups (current students and graduates). For both interviews and focus groups, questions were open ended, and prompts were used as needed for clarity.

Key topic areas were similar for all participants, but questions were tailored to each participant group. For example, instructors and preceptors were asked about life skill needs in OTA students in classes or practicum, while graduates and students were asked about their own needs as first year students and throughout their schooling.

To reduce potential bias in collecting data from participants who may have been acquainted with the principal investigator, a research assistant conducted the data collection. The research assistant was a final year master's in occupational therapy student who had previous research experience, received specific training for this study, and was supervised by the principal investigator via regular videoconference meetings.

Interviews
The average length of instructor interviews (n=6) was 25.3 minutes (minimum 19:22; maximum 33:55), and the preceptor interviews (n=3) had an average length of 16.8 minutes (minimum 16:35; maximum 17:43).

Focus Groups
The duration of one graduate focus group (n=3) was 21:24 and the other (n=2) was 39:02. The student focus group (n=4) was 51:03 minutes in length.

Data Analysis
Data analysis began after data collection was complete. Data were de-identified and then the principal investigator reviewed and analyzed the focus group and interview transcripts using the steps of applied thematic analysis described by Rossman and Rallis (2012), and incorporated an exploratory approach (Guest et al., 2012).

Every transcript was coded manually by the principal investigator and research assistant to obtain a general familiarity with the data and generate an initial set of codes. Codes were refined based on discussion. Transcripts were then coded using the refined code list in NVivo qualitative analysis software (QSR International Pty Ltd, 2020), cross-checked with the research team, and further refined.

The principal investigator and research team used several strategies to support qualitative rigor. The principal investigator kept an extensive reflexive journal and field notes to monitor biases and document the research procedures (Creswell & Creswell,
Findings were compared with life skills literature and occupational therapy theories. This triangulation of data supported the credibility of the study (Creswell & Creswell, 2018). To ensure that codes accurately described the data and to avoid a drift in the definition of codes, data were repeatedly coded, reviewed, and re-coded (Creswell & Creswell, 2018). To maintain integrity of data analysis, coding and interpretations were discussed and cross-checked with the research assistant and other members of the research team.

**Results**

A total of 18 participants took part in an interview or focus group. Nine interviews and three focus groups were conducted, and one interview participant, a preceptor, also sent additional information by email after the interview. A summary of participant demographics appears in Table 2.

**Table 2**

*Participant Demographics*

<table>
<thead>
<tr>
<th>Participant type</th>
<th>Professional designation</th>
<th>Experience in role* (years) [mean (minimum-maximum)]</th>
<th>Province†</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students (n=4)</td>
<td>--</td>
<td>--</td>
<td>Alberta (3)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Ontario (1)</td>
</tr>
<tr>
<td>Graduates (n=5)</td>
<td>TA</td>
<td>--</td>
<td>Alberta (5)</td>
</tr>
<tr>
<td>Instructors (n=6)</td>
<td>OT (2)</td>
<td>8.4 (&lt;1 – 16)</td>
<td>Alberta (1)</td>
</tr>
<tr>
<td></td>
<td>PT (4)</td>
<td></td>
<td>Ontario (4)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Quebec (1)</td>
</tr>
<tr>
<td>Preceptors (n=3)</td>
<td>OT (2)</td>
<td>6.3 (4 – 10)</td>
<td>Alberta (2)</td>
</tr>
<tr>
<td></td>
<td>TA (1)</td>
<td></td>
<td>Ontario (1)</td>
</tr>
</tbody>
</table>

OT = Occupational Therapist; PT = Physical Therapist; TA = Therapist Assistant
* For instructors, data shown are for experience in teaching OTA/PTA students. For preceptors, data shown are for experience as OT or OTA.
† For instructors and preceptors, province of current work is shown. For students and graduates, province of educational program is shown.

Findings were consolidated into the following key thematic areas:
1. Contributors to student success
2. Impact of students’ life skills on clinical encounters
3. Life skills training needs

**Contributors to Student Success**

Instructors, preceptors, and graduates were asked to identify life skills that are most helpful for enhancing OTA student confidence and success. The life skills identified ranged across a continuum from fundamental human behaviors – such as communication and initiative, to application skills for specific contexts – such as cooking and budgeting. Participants indicated that successful students demonstrate strong skills in communication, initiative, self-awareness, and critical thinking, and are capable in professionalism, time management, learning strategies, and problem solving. Although
not explicitly named as such by participants, we may term these skills as being within the domain of performance management. Students weaker in performance management skills were perceived as less successful by all participant groups. There were differences in the specific performance management skills different participant groups emphasized the most. Students referred to learning strategies most often, followed by stress management and time management, while instructors emphasized critical thinking skills.

Coping skills, critical thinking, and problem-solving abilities were perceived to allow students to manage the demands of college and life outside of school, while also dealing with challenges that arise. As instructors said:

I think it’s the coping and resilience to some degree. And stress management. So being able to handle the sheer workload and demands that are going on in an academic setting and possibly in their personal lives as well, too, and figuring out how to balance all of that. I think the students that can come up with some sort of a strategy or a plan to manage that the best they can and the ones who can’t seem to struggle or are not successful and it all seems to fall apart. (Instructor 1)

...the critical thinking to keep evaluating — so if one thing doesn’t work, try something else, try something else, try something else — isn’t quite in their skill set or their repertoire, [and] would require a lot of experience over time to be really good at it considering the population you’re working with. (Instructor 2)

One instructor highlighted the importance of performance management skills to employability as a healthcare worker.

I think there is a movement within our particular college to look at... essential employability skills, which may or may not have anything to do with the actual professional degree you are getting. But can you manage conflict in a group, can you communicate well, are you a good listener, can you manage your day and get things done, know how to receive and give feedback? If some of these basic skills are established somewhere then it’s going to make those things much easier. (Instructor 1)

Members within all participant groups described the importance of taking initiative, although framed the concept slightly differently. Graduates referred to a “high school mentality” among some students who “still live at home and... [believe that] nothing’s important because they always have their parents to fall back on” (Graduate 1). Preceptors described taking initiative in “speaking up...asking questions...and thinking on the spot,” (Preceptor 1) and demonstrating “independence in taking care of your own things” (Preceptor 2).
Instructors emphasized the importance of responding to new situations and thinking of creative solutions to problems, not giving up when one thing does not work, and taking initiative to address personal areas of deficit. As one instructor described,

...students that do the best... tend to be really well organized; they tend to take a lot of initiative in terms of doing their own research or taking that extra time outside of placement to well prepare for that. And that could include knowing that I don’t know how to cook, ... so I’m going to take some initiative to learn this on my own. (Instructor 3)

Another instructor described how successful students display initiative in response to shortcomings identified through self-reflection:

Those people that take the time to self-reflect seem to be the ones that don’t continue to make the same mistake and the next time a big exam periods come up and they’re flustered and they’re worried — they’ve learned from past experience. (Instructor 4)

Successful students were described as those who possess strong self-awareness. An instructor described this as “recognizing what you don’t know and filling your own learning needs” (Instructor 4). Another instructor said that “self-awareness is the ability to…recognize who you are and what your weaknesses are and build on those to build your confidence.” Students also demonstrate self-awareness through “identifying their areas of weakness and being open to receiving feedback and building and developing the other components further” (Instructor 5).

Students who struggled were said to lack the self-awareness to identify challenges and solve problems. An instructor indicated that “...often the people that will [access resources] are the ones that don’t need it. They’re not aware that they need it until they’re failing out and we’re sitting down together, and I say, ‘you need to do this because this is where it’s going’” (Instructor 5). A preceptor described the importance of:

...being able to acknowledge when something is not clear or when help is needed. Knowing how and when to approach that with a preceptor. Learning to take constructive feedback and know it doesn’t make you a bad person, it’s just something to work on doing even better next time. (Preceptor 3)

Students may struggle with the skills to maintain their own health and well-being. One student described challenges with maintaining consistent meal and self-care routines as a student.

...trying to just get like your meal prep or to shower to get to bed at the same time every day so you can try to get a proper sleep to be able to get up in the morning to function or even eat breakfast in the morning. Just that consistency is just really hard as a whole, for just like general life skills while in class. (Student 1)
Participants indicated that effective study skills and time management contributed to student success.

...how to study was huge. If you don’t know how you learn, how are you going to study this material independently? Because from high school and junior high, you're so [dependent] on your instructors… and then you get to a college/university level...and you’re not prepared for that, because they're two different instruction styles. Two different learning styles. And it's a huge jump, that doesn't have a great transition, and you just don’t always feel prepared for it. (Student 2)

Time management skills demonstrated by the most successful students were described by one student as follows. “I always envied the students who could manage their time...they weren’t fazed by anything. They were just cool, collected people…really stable and... level-headed” (Student 2).

All participant groups and 16 out of 18 individual participants referred to the importance of money management skills. OTAs may or may not work with clients on money management skills, depending on the workplace setting, but nonetheless, all participant groups identified the importance of money management life skills as contributors to OTA students' well-being.

Graduates, in particular, emphasized the importance of money management skills for OTA students. In both graduate focus groups, participants immediately identified managing finances as the life skill they found the most challenging as new students in their first year of post-secondary studies. Graduates referred to challenges OTA students may face with managing financial needs: for example, applying for loans or funding, and having enough money to meet expenses. Students mentioned money management as a skill that is beneficial personally, though not necessarily for working with clients; however, instructors and preceptors described the use of money management skills in OTA work.

Hands-on manual skills were an additional type of life skill that participants identified as necessary for student success. The most frequently described manual skill, which was mentioned by most of the members of all participant groups, was cooking and meal preparation. This skill was described similarly among participant groups. Cooking and meal preparation were considered beneficial personally and in working with clients.

I worked at a program where… we would work on sequencing with people, so the activity was steps to making a muffin, for example, or making a tea. But if some of the people I worked with didn’t know how to do those tasks themselves… how are they supposed to know the correct sequence when they don’t... know it either, right? So, they found that was a challenge. (Graduate 2)
Other manual skills, including grocery shopping, grooming, hygiene/personal appearance, laundry, mechanics/use of tools, and transportation skills were mentioned infrequently, but were described as important to student success. A graduate and a preceptor referred to the necessity of tool use in OTA work.

...working in the areas I’ve worked in, I do a lot of wheelchair repairs and that kind of stuff. A lot of students that come in and don’t even know how to use a screwdriver. (Graduate 2)

...how to use simple tools, like an Allen wrench and just stuff like that for equipment adjustment. I didn't learn any of that and I had to learn it on the job on the spot. (Preceptor 2)

Impact of Students’ Life Skills on Clinical Encounters
In the responses provided by all participant groups, there was a clear link between life skills, particularly instrumental activities of daily living (IADL) and performance management skills, and OTAs’ work with clients. Comments from all participant groups suggested that OTA students generally do not identify difficulty with basic activities of daily living; however, a mastery of both ADL and IADL is necessary for work with clients.

As one preceptor said, “Not that I've noticed a concern to date, but being able to do laundry to then be able to help someone else learn and practice those skills would also be an important life skill” (Preceptor 3).

One instructor and one preceptor indicated that some students struggled with basic ADL such as maintaining hygiene or wearing clean clothes. These participants indicated that such difficulty was rare among OTA students, but if present, challenges with ADL interfered with conveying the professionalism that instructors and preceptors consider important in the context of client care.

IADL are more complex than ADL, and comments from all participant groups indicate that IADL such as meal preparation and money management may often be challenging for OTA students. IADLs are a necessary element of effective functioning in OTA students’ personal lives, and participant comments suggest that these skills may or may not be necessary for working with clients. A preceptor described the differences between ADL and IADL for OTA students, emphasizing the complexity of IADL and the impact of IADL skills deficits on client encounters.

I find in the ADL area, it's… more cut and dry in the teaching of the steps and things to watch out for and the safety considerations. I think it's more the IADLs that we would see some of those challenges… cooking… baking … budgeting and … skills that we need to teach to clients when we’re looking at executive functioning …if students don’t have the ability to break it down themselves, it can really impact their ability to appreciate those nuances and translate them to their client session. (Instructor 3)
All participants described the importance of communication skills in clinical encounters. There were differences in the ways students and graduates talked about communication skills compared to instructors and preceptors. Students and graduates tended to emphasize that competence in communication and IADL allowed students to feel more confident while working with clients. According to students and graduates, building trust with clients, explaining information clearly, and client teaching are essential communication skills.

Graduates, students, and preceptors emphasized client teaching.

...if they [OTA students] don’t understand the task at hand and the reason why we’re doing rehab, then it’s almost pointless for them to be teaching. It’s like trying to teach someone how to drive a standard vehicle when you’ve never driven a standard yourself. (Preceptor 1)

I think if I had the life skills training during my schooling, I think I would better explain to clients how to do things. Or teach them techniques [and] tips... to make it easier for them. I think that would really come in handy instead of me learning along the way, seeing how my client does, picking that up and then… “oh, they could do it easier this way,” and then applying it to the next client… instead of... “okay what do I do now?” (Student 3)

Instructors more often described effective communication as communicating with confidence and in an effective and appropriate manner.

Students take courses on communication where they build on communication skills, but it’s certainly a life skill outside of being a therapy assistant. And if some aspects of communication are very weak coming in, they can be challenging to develop. Like just the comfort in managing disagreement or conflict. Or the ability to be confident enough to receive feedback and accept it and build on it. (Instructor 5)

Students were perceived as more successful in practicum placements when they can interact effectively with clients and colleagues, manage conflict, and apply feedback to improve their clinical skills.

If I had to put my finger on it, it’s really understanding the nuances of what the client might be communicating. So, after you work in the field for a number of years you really start to be able to interpret silences or you ask a follow-up probing question to something that the client said, and I find that we have to do a lot of training in that area. It’s not innate; people aren’t coming in with that background and those skills. And some of it is therapeutic communication skills that should be taught in the program and some of it is a change in basic communication skills in the generation coming in. (Instructor 3)
Participant comments indicated that it was also challenging to help clients in areas where students may lack confidence. Translating skills to the client’s particular situation tended to be challenging for students. An instructor described how students may experience difficulty when working with clients whose needs are in an area where the student lacks confidence or experience.

I think it depends on the particular client—what are their weaknesses and does the student have that background? Because maybe they are really good at cooking or shopping and budgeting but they’re horrible at time management and stress management. So if the client and the student or the rehab professional match up then it’ll work but if it’s...out of their...comfort zone then I think it’s going to be a struggle. (Instructor 1)

One student mentioned that communicating with clients can be especially challenging for “younger students, who maybe...have a lack of confidence” (Student 1). Another student indicated that increased life skills would have a positive impact: “I think my confidence in how I say things would definitely be impacted. [In] my treatment with the client…I could get rid of that stereotype with me being young, and a student” (Student 3).

Instructors and preceptors identified building rapport and communicating effectively with clients as essential components of effective clinical encounters. Building rapport is necessary for helping clients feel comfortable in treatment, and as one preceptor described, it is also a necessary component of successful therapeutic interactions with clients.

Instructors and preceptors noted that competence and confidence in life skills enabled students to focus more on the client rather than on performing the specific task being used in therapy. This ability to focus on the client enables students to better identify safety issues or teaching moments with clients.

You have to do your planning ...budgeting...shopping, and then you have to know how to actually cook...but you need to have practice...so that that isn’t something you’re constantly trying to think and figure out as you go... If they’re still trying to figure out how do I manage the stove with this? How do I manage the timing with this? If they’re worried about all of that, it’s harder to provide the actual intervention and care to...the client...and focus on what [they] need...they’re focused on the cooking or the baking rather than what the actual target is. (Preceptor 3)

**Life Skills Training Needs**

Each participant group identified potentially relevant topics for life skills training and ways that life skills training may benefit students academically and personally. Responses from graduates suggested that more knowledge in the basic life skill areas for oneself personally could improve confidence in working with clients, but that this information should be combined with instruction on client teaching. Participants
suggested that the skills needed to help clients may be different than the skills required for students’ own functioning. For instance, money management and stress management were needed personally, while client teaching skills were needed for work with clients. As one student mentioned,

I would be thinking more about finances, or how to manage stress, or...sleep management, or stuff like that...the things that I needed to learn for clients aren’t necessarily the things I would need to learn for myself as a student. (Student 2)

The skills identified by participants were categorized into thematic areas for the purpose of creating relevant life skills training modules in the next phase of research. Three thematic areas were identified and defined based on analysis of the skills that participants described, and included: performance management skills, money management skills, and manual skills.

Performance management skills are the life skills related to functioning effectively as a student and OTA in terms of managing stress, managing time, behaving in a professional manner, communicating clearly, and applying learning strategies to succeed academically. Money management skills are the tasks and abilities involved with managing finances. Budgeting, financial literacy, and managing financial needs are examples of money management skills that participants described. Manual skills are the hands-on skills necessary for daily life and work as an OTA for example, meal preparation, use of tools, and transportation skills.

Participant comments suggested that students could benefit from training in both personal life skills and life skills that apply to working with clients. All participant groups suggested such life skills training would help students be more successful academically and clinically.

**Discussion**

Themes from the data in this study suggest that life experiences and foundational life skills could be key factors that support OTA student confidence and success in clinical encounters. Life skills are developed through life experiences (Brooks, 1984; Pellegrino, 2012), which relate to being exposed to, and having practice with, different skill or knowledge areas. For example, students who have experience preparing meals are more likely to be able to effectively cook food for themselves or work on meal preparation skills with a client.

Students who are able to identify gaps in their own life skills and take the initiative to find information, ask questions, and learn new skills are able to be successful. When unfamiliar situations arise, these individuals are able to learn, apply feedback, and apply their skills and knowledge from other areas. This ability to solve problems with a combination of self-awareness and taking initiative were perceived by our participants as a key factor in student success.
Successful students are not necessarily described as those with the strongest technical skills or academic abilities; rather, they were deemed to possess a combination of life experiences, foundational skills, self-awareness, and initiative. These non-technical skills may be more important than technical skills because when students with good non-technical skills encounter an unfamiliar situation or a problem, they have the ability to figure out how to solve it. Existing literature indicates that non-technical skills are arguably the most important attributes in successful workers (Fields, 2015; Matteson et al., 2016; Parlamis & Monnot, 2019). Furthermore, our findings suggest that even students with strong technical skills can struggle in novel situations if they lack the problem-solving capabilities to figure out new ways to apply their knowledge and abilities.

Uniquely in this research, competence and confidence in IADL and communication skills were described as important factors in working with clients effectively. Participants suggested that the ability to apply life skills with confidence when working with clients has a role in students’ clinical success. Life experiences support foundations for problem-solving (Pellegrino, 2012), and our research indicates that stakeholder groups in OTA education perceive those students who possess problem-solving skills can apply their experiences and knowledge in novel ways and take steps to fill gaps in their own life experiences. Students with inadequate problem-solving are unable to apply experiences and prior learning to novel situations (Pellegrino, 2012). In unfamiliar situations, students with low problem-solving skills are not able to effectively observe the client to gather data and report observations back to preceptors. These missed opportunities restrict student confidence and the quality of clinical encounters.

Students who get through a program and graduate may be considered successful, but Hunter (2006) notes that success is about more than just academic achievement and program completion. Success involves many aspects of student life such as identity, competence, and goal achievement (Hunter, 2006). Study participants echoed these findings, describing the most successful students as those who not only completed their diploma, but also demonstrated confidence and competence in a variety of situations. Existing research suggests that students’ coping and problem-solving behaviors can impact their success. Beattie et al. (2018) found that the most successful students find the transition to university just as challenging as the average student, but tend to be more conscientious, spend more time studying, and have higher expectations of the grades they will achieve. Similarly, Richardson et al. (2012) found that students who are more successful tend to demonstrate more effective coping skills and to more effectively balance multiple demands. The findings from this study are supported by existing research that the most successful students are likely to demonstrate effective learning and problem-solving behaviors such as study skills, time management, stress management, self-awareness, and initiative.

Some of the manual skills that were mentioned infrequently are important in OTA work (the use of tools, for example), and the importance of some life skills may not always be recognized. Participants’ comments suggest that if deficits in these skills are present, OTA students are likely to struggle during practicum placements or on the job.
Study Strengths and Limitations
A strength of this research is the inclusion of a variety of participants including OTA instructors, preceptors, second year students, and graduates. These four participant groups each bring a unique perspective about the life skill needs of OTA students. Students alone may not realize where their skills are lacking, but those who work with students may be able to identify areas where students struggle.

Transferability of findings is limited due to the small sample sizes of participant groups and limited geographic locations of participants. Life skill needs, challenges, and priorities may differ across regions and cultures. Participants in this study may not be representative of all students, graduates, instructors, and preceptors. Instructors’ observations of OTA students are impacted by the particular cohorts and individuals with whom they have worked. OTA employment settings can have vastly different duties and expectations. Participants’ perspectives do not necessarily apply to other settings.

Data collection for this study occurred in the early stages of the COVID-19 pandemic, and the real and potential impacts of this on the data collection and results must be acknowledged. Participants were potentially facing increased stress, and changes to their personal, work, and school routines. These changes could have impacted perceptions of both students and instructors of which life skills were most important and what they reported in interviews or focus groups.

The principal investigator’s role as an instructor in an OTA program influenced the study methods and interpretation of findings. While efforts were made to minimize potential biases (such as having a research assistant conduct interviews and focus groups), the principal investigator’s role and experiences are woven throughout this work. To minimize bias, data were analyzed and interpreted in collaboration with the research team.

Implications for Occupational Therapy Assistant Education
Although communication, client teaching, and professionalism skills are components of all OTA education programs, study participants still noted gaps in these areas and indicated that additional training is needed. To help students develop the foundations necessary for confidence and quality of clinical encounters, OTA programs may need to consider targeted approaches to support students in developing greater expertise in non-technical skills. Further research is warranted regarding how and where to teach these non-technical skills in OTA education programs.

Communication and professionalism are important, but arguably self-awareness and initiative may be even more essential. Experience over time helps individuals make the progression from novice toward expert, but individuals do not necessarily become experts even with years of experience (Field, 2004; Persky & Robinson, 2017). Progressive problem solving, where students are required to advance through solving progressively more complex problems, helps students move through the stages of...
developing expertise (Persky & Robinson, 2017). To help students move from novice to expert in self-awareness and initiative, perhaps programs can structure their curricula to expose students to progressively more challenging scenarios that call upon these skills.

While this study focused on OTA students, students in other programs may also experience challenges with life skill development. Occupational therapy students must possess knowledge and competence in life skills for their work with clients. These students, too, may struggle with life skill mastery. On the one hand, students in occupational therapy programs are generally older than those in OTA programs, having already completed some post-secondary education, and may have greater life skills already as students. On the other hand, occupational therapy students are expected to have greater mastery of these skills by graduation in order both to design care for clients and direct the work of OTAs. Thus, the principles of exploring life skills needs may be similar for occupational therapy students but further research is required to explore if the types and details of those needs may be different. Research may also be needed to explore occupational therapy students’ life skill challenges and whether their challenges impact their academic and placement success.

Although there is evidence that life skills can be taught (Brooks, 1984; Chakra, 2016; Pellegrino, 2012; Picklesimer et al., 1998; UNICEF et al., 2012), perhaps programs need to grapple with whether they should embed the content in core curriculum or consider it to be supplemental education to which students who need it are directed, similar to how postsecondary institutions may offer writing supports or extracurricular learning opportunities for specific skills like First Aid training. Although the idea of instructors incorporating life skills training into activity analysis seems interesting, it represents additional curricular content in an already crowded curriculum. An alternative might be to ensure that students are screened for life skills at relevant points in the curriculum and referred to additional supports if needed. One could speculate that educators may need to make the implicit skills more explicit, even if the educators do not have core curriculum space to include life skills training. The logistical and philosophical questions about implementing explicit life skills training for OTA students are worthy of exploration in further research.

Programs may be able to facilitate life skill development in OTA students by offering life skills training, spending more time on basic activity analysis content, or by partnering with student support services to offer specialty workshops on topics such as financial or time management skills. Further research is recommended to continue to explore the effectiveness of life skills training.

**Conclusion**

Life skills are instrumental to student success, both in managing one’s personal life and in working effectively with clients. Participants described a variety of life skills that may be challenging for OTA students, such as time management, stress management, managing money, and cooking. Results suggest that successful OTA students possess a combination of life experiences, foundational skills, self-awareness and initiative that
supports confidence and quality of clinical encounters. Limited life skills may lead to inadequate activity analysis capabilities, which may decrease student confidence and restrict quality of clinical encounters. Life skills training embedded into programs may help to support the development of foundational skills to support OTA students’ performance.

References


