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Lived Experiences of Filipino Male Occupational Therapy Students

Abstract

The historical dominance of women working in occupational therapy, coupled with the underrepresentation of males in the field globally, creates a need to investigate the experiences of male students in occupational therapy programs. In the context of the Philippines, where women make up 74.72% of the occupational therapy workforce, this study aims to address the following scaffolding problem by exploring the experiences and motivations of male students in Philippine occupational therapy programs. This study seeks to shed light on the factors influencing their educational journey and contribute to a better understanding of gender dynamics within the field. A qualitative design was used. Nine male occupational therapy students from various universities across the Philippines completed a survey questionnaire developed by the authors and attended a focus group discussion. Qualitative data was recorded and analyzed using thematic analysis. Upon analysis, five themes emerged: (1) Means and Not the End, (2) Rapport and Communication, (3) Society and Stereotyping, (4) Introspection of Male Students, and (5) Furtherance of Gender Inclusivity. The findings suggest that there are roles and expectations specific to male occupational therapy students within the Philippines, which may differ to some extent from those of their female counterparts. The participants experienced particular challenges and opportunities due to their gender. These results may be used to understand the existing gender disparity still present in different occupational therapy workforces.

Keywords

Gender, health profession education, qualitative research

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Lived Experiences of Filipino Male Occupational Therapy Students

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ABSTRACT

The historical dominance of women working in occupational therapy, coupled with the underrepresentation of males in the field globally, creates a need to investigate the experiences of male students in occupational therapy programs. In the context of the Philippines, where women make up 74.72% of the occupational therapy workforce, this study aims to address the following scaffolding problem by exploring the experiences and motivations of male students in Philippine occupational therapy programs. This study seeks to shed light on the factors influencing their educational journey and contribute to a better understanding of gender dynamics within the field. A qualitative design was used. Nine male occupational therapy students from various universities across the Philippines completed a survey questionnaire developed by the authors and attended a focus group discussion. Qualitative data was recorded and analyzed using thematic analysis. Upon analysis, five themes emerged: (1) Means and Not the End, (2) Rapport and Communication, (3) Society and Stereotyping, (4) Introspection of Male Students, and (5) Furtherance of Gender Inclusivity. The findings suggest that there are roles and expectations specific to male occupational therapy students within the Philippines, which may differ to some extent from those of their female counterparts. The participants experienced particular challenges and opportunities due to their gender. These results may be used to understand the existing gender disparity still present in different occupational therapy workforces.

Introduction

According to Taylor (1995), occupational therapy has historically been dominated by individuals who exhibit traits such as tenderness, caring, nurturance, non-competitiveness, passivity, and dependency. In the Philippines, these are commonly perceived as feminine attributes. As a result, occupational therapy has been commonly deduced as a profession primarily suitable for women, reinforcing the country's societal norms and expectations of one's gender. This perception has influenced historical recruitment practices within the field (Bomia, 1999). Consequently, even in modern times, male students pursuing occupational therapy may find themselves in predominantly female environments (Barker et al., 2013). This situation can present unique opportunities and challenges for male occupational therapy students that may differ from those experienced by their female counterparts.

In the Philippines, women make-up the majority of the occupational therapy workforce at 74.72% (Carandang & Delos Reyes, 2018). Although this trend is usually reflected in other countries (Birioukova et al., 2012; Ferreira & Almeida, 2022; Japanese Association of Occupational Therapists, 2017), it is worth noting that males account for 25% of the Filipino occupational therapy workforce, which is a more significant rate than other statistics reported from different parts of the globe.

While this study focuses on gender-specific prejudices seen within the Philippine occupational therapy field, the researchers recognize that gender roles and characteristics are diverse and not limited to a binary framework. The understanding of occupational therapy and the traits valued within the profession has generally progressed to be more inclusive, acknowledging, and embracing the full spectrum of gender identities and expressions.

This study was conceptualized in order to highlight the importance of perceiving male and female occupational therapists as equally competent in their roles to meet the needs of a diverse patient population. While the researchers recognize that the occupational therapy profession has evolved significantly over time, moving away from a period when only women were hired by the American Occupational Therapy Association (AOTA) between 1900 and 1930, this study highlights that there is still a significant disparity between the number of women and men entering the occupational therapy field in the Philippines, even after a century.

Furthermore, review of related literature has proven there are limited studies on male occupational therapists' and male occupational therapy students' experiences. The purpose of this paper is to shed light on the experiences of male occupational therapy students within the Philippines, to understand the challenges they face, to highlight their successes, and to potentially inspire other male students to consider a career in occupational therapy.

The statements included in the results of the study do not reflect the thoughts and opinions of the researchers, rather the statements and identified themes serve to showcase the underlying gender bias still present in some areas within Philippine society and how the participants view and handle such instances of gender prejudice.

Methods

A qualitative research design was used to study the lived experiences of male occupational therapy college students within a female-dominated program in the Philippines. Moreover, using qualitative design allowed researchers to understand the thoughts and feelings of chosen participants, which leads to a more profound knowledge of the meaning these participants associate with their experiences within the occupational therapy course (Sutton & Austin, 2015). For the study's research instruments, online questionnaires, focus group discussions, and field notes were used. See Table 1 for the interview questions that were validated by licensed male occupational therapists.

In order to gather in-depth knowledge, the authors devised research questions exploring the participants' demographic profiles, their reasons for pursuing occupational therapy programs, the challenges and opportunities they encountered as a male occupational therapy student, specific experiences that differed from female counterparts, and how all these experiences affected their status as a student within the program.

Table 1

Interview Guide Questions

| Interview Questions | |
|---------------------|---|
| 1 | What were the reasons or factors that influenced your decision to enter the occupational therapy program? |
| 2 | What would you say are the opportunities or generally positive experiences you have encountered as an occupational therapy student? |
| 3 | How do you think being a male occupational therapy student affects these positive experiences? |
| 4 | What would you say are the challenges or generally negative experiences you have encountered as an occupational therapy student? |
| 5 | How do you think being a male occupational therapy student influences your experience of these challenges? |
| 6 | On a scale of 1 to 5, with 1 being the lowest and 5 being the highest, how would you describe your overall performance in the occupational therapy program? Please elaborate. |
| 7 | What advice do you wish to give other prospective occupational therapy students who are thinking of pursuing occupational therapy? |

Participant Recruitment

The study had a total of nine participants, with at least one male occupational therapy college student per college level. A study by Guest et al. (2012) stated that a sample of at least six interviews is sufficient in developing high-level meaningful, overarching themes and valuable interpretation. The participants per college level were recruited through purposive sampling, which is used to select information-rich cases and is the most effective use of limited resources when it comes to qualitative studies (Patton, 2002). The researchers communicated with a former president of the Occupational Therapy Students Assembly (OTSA), an official organization formed by Filipino occupational therapy students, to identify potential participants who met the inclusion criteria. The researchers then emailed universities offering occupational therapy programs based on the suggestion of the former OTSA president to encourage participation of information rich respondents that are within the scope and limitation of the study. As qualitative studies uncover the nature of a phenomenon, purposive sampling calls for individuals or groups of individuals who are proficient and well-informed about the chosen phenomenon (Creswell & Plano Clark, 2011). Purposive method entails continued sampling until the information gathered ceases to become substantive (Miles & Huberman, 1994).

For participant inclusion, both cis gender and transgender male occupational therapy students living in the Philippines were chosen. All participants had taken the occupational therapy undergraduate course in a recognized program by a higher education institution in the Philippines since their first year of college. The Philippines is made up of three primary island groups, namely Luzon, Visayas, and Mindanao. They are divided into 17 regions (Philippine Statistics Authority, n.d.). Luzon has eight regions (Regions I, II, III, IV-A, and V, and CAR, NCR, and Mimaropa), Visayas has three regions (Regions VI, VII, and VIII), and Mindanao has six regions (Region IX, X, XI, XII, XIII, and BARMM). In the country, there are about twenty-one schools that offer occupational therapy as an undergraduate course. The majority were sent emails by the researchers, however, only nine students from the listed seven schools in Table 2 participated in the study.

Ethical Consideration

This study was approved by the Department of Occupational Therapy, College of Allied Medical Sciences of the University of Batangas. It followed the Declaration of Helsinki. The authors declare that human research participants signed informed consent forms before participating in focus group discussions, including permission to publish all their statements. Before the focus group discussions, the authors informed the participants about the importance of confidentiality, their rights as participants, and their ability to withdraw from the study at any point. Written consent was required from all participants before the initiation of the focus group discussions.

Trustworthiness and Rigor

Member-checking was conducted after the focus group discussions as a means of validating the accuracy and authenticity of the collected data. Participants provided feedback on researchers' interpretations and conclusions which were found to be aligned with their experiences and perspectives. There were no noted misinterpretations or overlooked aspects as claimed by the participants, thereby increasing the credibility of the study's findings.

Moreover, reflexivity was used by the qualitative researchers to critically reflect and acknowledge their own biases and positions which could influence the research process and findings. The researchers used non-leading research questions, as shown in Table 1, and manual coding was done without the researchers' personal assumptions about gender and gender stereotypes playing a factor. The questions in Table 1 were externally validated by licensed male occupational therapists, then the data generated underwent member-checking to ensure that the researchers' perceptions did not unduly influence the interpretation of the data. Researchers examined the transcripts, recorded interviews, and notes on scheduled meetings to analyze the documents and offer clear feedback. Summaries of the gathered data were explored to check narrative and interpretation validity of each member's understanding of the file.

Data Collection and Analysis

Online questionnaires were given to gather demographic data such as age, gender, city, region of origin, year level, and school of the participants. The total number of participants was clustered into two focus groups, randomly generated by the authors. Each subdivided group contained at least four participants to reach data saturation with regard to the qualitative information collated. Hennink et al. (2019) stated that two to three focus groups are warranted in a study where the goal is to obtain some level of data saturation.

The researchers utilized focus group discussions to allow participants to engage in group conversations, encouraging the exchange of ideas, perspectives, and experiences among themselves which enriched the qualitative data collected. This interactive format allowed participants to build upon each other's contributions, explore diverse viewpoints, and potentially uncover collective insights that may not emerge in individual interviews.

Before the focus group discussions, participants were given unique identifiers, or codenames, to ensure confidentiality. Each focus group discussion lasted at least 60 minutes but did not exceed two hours, conducted through video calls on Zoom. The designated interviewer spearheaded the focus group discussions, referring to participants only by their unique identifiers. The same interviewer took field notes. The same set of questions, focusing on the experiences of male participants being occupational therapy students, was used in both focus group discussions to ensure consistency and comparability of data across different groups. The last author and external validators validated all questions utilized. Each focus group discussion was recorded digitally and through note-taking, with all participants' written and verbal

consent. No answers from the participants during the focus group discussions were clarified in a leading manner to prevent bias. The authors transcribed all the verbatim statements of the participants.

The qualitative data's concepts, interactions, behaviors, incidents, themes, and categories were determined through latent thematic analysis. This method provides a concise explanation and interpretation of data set themes and patterns (Majumdar, 2018). According to Bodine (2021), manual coding requires researchers to read their data and develop and assign codes manually. Prior to manual coding, the researchers familiarized themselves with the transcriptions of the focus group discussions. The perceptions and experiences of the participants were compared and analyzed, highlighting recurring concepts, until the researchers identified meaningful segments of data with similar themes. Interpretative work was needed for the themes to be more than just descriptions of data (Braun et al., 2006).

These concepts were used to develop the overarching themes that captured the main ideas and insights of the study. Maher et al. (2018) stated that, although manual coding can be time-consuming, it enhances trustworthiness by enabling researchers to constantly compare and analyze different perspectives from the participants. It allows for a nuanced exploration of the data and the identification of underlying concepts, assumptions, conceptualizations, and ideologies expressed by the participants.

Results

With a small population of male occupational therapy students compared to female occupational therapy students in the Philippines, little information is known about men's opportunities and challenges within the occupational therapy program. The study explored men's lived experiences while enrolled in a university delivering occupational therapy program to address this. The five themes that arose from the data analyses can be seen in Table 3.

All statements from the participants and the consequent themes resulting from the qualitative data do not accurately represent the researchers' views on gender, gender roles, or gender bias present within the Philippines or in the occupational therapy field. It is dutifully acknowledged that occupational therapy as a whole has progressed in terms of gender inclusivity compared to the beginning years of the profession. The participants' perceptions are their own and are a result of Filipino socio-cultural norms the participants most likely have encountered within Philippine society.

Two sets of virtual focus group discussions were conducted to reach data saturation. Due to limitations in resources, the researchers obtained 80% data saturation as opposed to full saturation. Hennink et al. (2019) stated that two to three focus groups in a study obtains 80% saturation. Achieving full saturation requires a larger sample size for a more extensive data collection. The researchers sought a balance between collecting adequate data that answers research questions from Table 1 while managing the resource limitations.

Table 2*Profile Distributions of Participants (N=9)*

| Profile | Demographic Data | <i>f</i> |
|---------------|--------------------|----------|
| Age | 16-20 years old | 5 |
| | 21-25 years old | 4 |
| University | School A | 1 |
| | School B | 2 |
| | School C | 1 |
| | School D | 1 |
| | School E | 1 |
| | School F | 1 |
| | School G | 2 |
| College level | 1st - year college | 1 |
| | 2nd - year college | 2 |
| | 3rd - year college | 4 |
| | 4th - year college | 2 |

Table 3*Themes*

| Themes |
|---|
| Means and Not the End Rapport and Communication Society and Stereotyping Introspection of Male Students Furtherance of Gender Inclusivity |

Theme 1: Means and Not the End

The commonalities that came to light when participants shared their reasons for joining the occupational therapy program were familial influence and the desire to pursue medicine. Participants who witnessed family members working in the medical world felt internal or external pressure to follow in their family's footsteps. *"My mother was also an occupational therapist. At a young age, she used to bring me to orthopedic center, so I was able to be introduced to what occupational therapists are really doing, especially in orthopedics."* In addition, a participant stated, *"I was forced by my father to take this program because our family is full of therapists; my sister is a licensed OT, and my father is a licensed RT [respiratory therapist] and PT [physical therapist] graduate."*

Another participant shared:

My parents, specifically my mother, she [told me], "You're good with kids."... So, she recommended me to occupational therapy, which was like a holistic course focused on assisting and rehabilitating both pediatric and adult patients in order to reclaim their occupations.

Additionally, a number of participants in this study who applied to an occupational therapy program viewed occupational therapy as a worthwhile pre-medicine course due to the knowledge of occupational therapists rehabilitating and providing treatment for people of all backgrounds with different conditions. They admitted to only using occupational therapy as a means to an end, wishing to pursue a different path once they graduated from the undergraduate course. A participant said, *"I was thinking about what could be a nice medical-related program to pursue, since I know that I've wanted to take a medical-related program [since the beginning]."* Another participant said, *"I'm planning to pursue psychiatry or doctor of psychiatry, so they said that occupational therapist or occupational therapy is like the pre med course I should go to."*

Theme 2: Rapport and Communication

One of the participants shared their initial interaction with their female classmates during group study sessions. The participant seemed to perceive a barrier in connecting due to the difference in their genders.

I was listed in a female dominated group and I was just the only guy in it. I can say that I was given the most role in the [group] reporting. I think I have twenty-six pages to report, while they only get, like, few pages. Although, I didn't hold a grudge about it since maybe it is easier to communicate with same gender at first.

Similarly, some participants have had concerns about how to approach or communicate with female students, due to cultural or personal reasons. A participant stated that, *"I was just accustomed with joining male colleagues in highschool, so maybe that is just a part of why it is a challenge at first to join a girl dominated classroom."*

However, as they continued to engage in group study sessions over time, they discovered that their gender differences were not significant in the context of studying. One participant said:

With regards to group study, for example, when reviewing for an exam, I find it difficult to interact with my classmates since they were mostly females, so I don't know how I will socialize with them at first. But as time goes on... I realized that being a male is not a factor since we all study the same lessons.

Once the participant got over these initial hurdles and became friends with his female classmates, it made the challenges of the occupational therapy program bearable for the participant. The participant shared:

I do have a friend group within the program [now] and half of it are females since, you know, we're female dominated. They were quite supportive and very friendly to others as well. They kind of helped me a lot within this college journey of mine since I think I study better with them.

Another participant also shared, "[The class] has always been a very... close and supportive environment among both male and female students. So... there's really no difference when it comes to gender."

Theme 3: Society and Stereotyping

Some participants specified that a number of patients in the clinical setting preferred having a female occupational therapist guiding them through the different occupations they addressed. One participant shared:

When you go to the clinics, you will feel that there are still patients who prefer female therapists; female occupational therapists. Okay... the reason for this, they say, is because females are more gentle, more caring, so I guess... there comes in these gender stereotypes. Okay, so it's [gender preferences] not necessarily from your peers, but from the patients... because females are more calm when handling patients, so on and so forth.

The same participant added:

There are things that are more difficult to share with a male therapist; it's not because they discriminate against men, but maybe it's because of the level of comfort; it just so happens that there are naturally more difficult things to explain. I'll give you an example; for example, for girls transitioning to teenage years, it wouldn't be as comfortable if a male therapist would discuss with her how to change her napkins... Earlier today, I had a patient where I had to discuss how to change and maintain their catheter, and since she was female, I had to discuss to her the anatomy, like the labia... so, point here being, it's just naturally uncomfortable.

The gender difference was also reflected in another participant's experience.

Since I am handling a girl patient in the center, it is more of an awkward situation since I am a male. Also, the parents think that since the patient is female, the assigned therapist is also [going to be] a female. If there is an intervention with toileting, it is awkward for them and also uncomfortable at the same time.

Another participant had a similar experience, although he believed that the patient might have been generally wary of communicating because the participant was a stranger at first, rather than because he was a man. *"In one of my evaluations with a little girl, it seems that she was not that interested in interacting. It might have to do with the fact that she might feel a little bit uncomfortable when it comes to interacting with a stranger that she hasn't met before."*

The interviewer inquired about how the participants handled these therapist-patient interactions, and one participant answered:

[I handle it] very calmly and very respectfully. You explain to them to give you this chance, that you can also do what the females are doing. And then, when they do experience [getting treated by a male therapist], the same patients are the ones who say, "Yes, it's my first time to have a male therapist, and it's okay too." And some even say, "It's better to have a male therapist," especially in pediatric and adult settings. So, for the kids, male therapists tend to be more direct, so in that sense, there is more compliance from the kids. As with the adults, because [between men and women] there's inherent difference in strength... okay, I'm not saying women are weak but I'm saying... we have to acknowledge the physiology behind it, that men are able to apply more pressure, to lift, and to mobilize certain areas of the body, certain muscle groups... I think [patients] are able to see the benefits of having a male therapist.

Theme 4: Introspection of Male Students

Within their pursuit of the occupational therapy program, the participants were able to reflect on their characters, strengths, and weaknesses related to challenges and opportunities they encountered. A participant stated:

For me, I would rate my performance with a 3 [out of 5], considering I'm still a freshman. There is still so much to learn and experience since, based on the experiences I have now, like in the anatomy and foundational courses, I feel discouraged since it's not hands-on for a more immersive experience.

One of the participants who also rated their overall performance in the program a 3 out of 5 explained that:

I just have to improve, improve, improve on the things I do. I have to know what I am doing. I have to improve some of the things that I'm saying. I have to elaborate more on the... medical terms that I am giving. Especially when I saw the revisions that I have to do on my initial evaluation for the clinic when I was evaluating one of the children.

A different participant responded:

I'm still learning and I can still adapt to... this current semester... I think in my overall performance, why it's 4 [out of 5], I'm still, like, trying to improve. I'm trying to... keep up with, you know, with some of the honor students... it is like a competition [here in my class]. Another participant shared he believed his performance was, *"So far... 4 [out of 5]. Because... I can keep up with the*

lessons, although I still have doubts that maybe I'm not learning enough. When I go to the clinic, I still struggle a bit with what activities to give my clients for the day... But my supervisors are there to guide me throughout the entire session, and they always have feedback.

The participants also addressed the difficulty that occupational therapy students might face when first stepping into the course. One participant stated, *"I have this friend who is starting college soon and they want to pursue OT, and I joke saying, 'Don't! It's too hard!' But deep inside me, I'm like, 'Nice, that's nice for you,' because the Philippines really needs more occupational therapists."* In line with this, a participant cautioned, *"Be ready for the difficult journey ahead, and if it ever gets to a point where you want to give up, you can rest, but don't give up. If you like it, or if you love what you do, just keep going."* Another participant mirrored the sentiment, *"Be prepared with everything, with all the emotional burden that occupational therapy comes with; in academics, the pressure to maintain your grades and keep up with others."*

One participant believed that, *"Occupational therapy will open you to a lot of new things, will open you to a lot of challenges, and will open you to a lot of explanations to your unanswered questions before."* Another participant declared, *"Fake it till you make it—because in OT you will eventually learn the concept of doing, being, and becoming. So, you have to do it, you have to be it, so that you can become [an occupational therapist]."*

Theme 5: Furtherance of Gender Inclusivity

It was observed from the participants' statements that the predominance of women in occupational therapy was not a significant disincentive for men entering the profession. A participant said:

I have this mentality that I am part of the progressive generation. The past norms are becoming irrelevant to use now. For example, "This field [occupational therapy] is only for females"—it is not relevant anymore since we are a progressive generation. It's [occupational therapy] becoming more accepting regardless of your demographic or gender or economical status.

This was backed by another participant, *"Speaking on behalf of my male classmates, I think it's not really a factor [of not joining occupational therapy programs] that there are more females in the classroom. It's just that we are used to having a balance in both genders when we are in high school."*

Moreover, a participant stated that, *"I think there is no connection with the experiences as an OT [student] with gender, since it depends on the person; on how they live out or digest the learnings they get in the field."* This was agreed upon by another participant claiming that, *"I think being a male occupational therapy student does not really affect these experiences. For me, it's more on how you make the most out of these experiences. Doesn't matter if you're a girl or a boy."* The common sentiment shared by participants was that occupational therapy is open to all genders. A participant shared, *"Being a male [in occupational therapy] did not hinder my positive experiences because our [occupational therapy] community today is far different from before."*

One of the participants said:

Being male does not affect the service I give to the clients I handle, nor will it affect the service I will give to clients in the future. I guess it's [gender differences] more on how we help, since females [in occupational therapy] also help clients in different ways. There are variations of service between the help I give and the help my female classmates give.

In general, the majority of the participants agreed that being a male does not affect their motives to continue taking the occupational therapy program. They know the value of the service they can give to clients as male occupational therapists, as reflected by a participant's statement, *"The world we live in today needs more empathetic men to be able to truly advance our advocacies and start moving towards a truly inclusive society."*

Discussion

Half of the participants expressed they chose the occupational therapy undergraduate course either to have an alternative program towards medicine or because at least one family member heavily influenced their decision. The first theme is in line with Pruthi et al. (2013), stating that more students choose medicine because of the influence of a family member. Moreover, participants highlighted their desire to pursue a medical-related field, indicating they saw occupational therapy as a pathway to fulfill their passion for medicine. This observation aligns with the understanding that occupational therapy programs often provide a strong foundation in science-based subjects, making it a suitable pre-medicine course. This is backed by Narayanasamy et al. (2019), where factors in choosing medicine that emerged from their study are due to personal growth, personal calling, personal concern factor, and professional concern factor. Overall, the participants' motivations for joining the program were due to familial ties and a desire to combine their medical interests with a medical-related field like occupational therapy.

Moreover, the challenges mentioned in the themes shed light on the initial concerns and subsequent growth experienced by male occupational therapy students. One participant expressed difficulty in connecting with his female classmates during group study sessions due to perceived gender differences. However, over time, he realized that gender was not a significant factor in studying and developed a more inclusive perspective. In line with this, it has been observed that males structure their peer groups by creating a large, central cluster composed of smaller, integrated sets with same-sex friends (Benenson et al., 2006). Benenson et al. (2006) highlighted that sociable boys preferred accomplishing tasks within large groups, while sociable girls preferred one-on-one interactions. The participant may have found it necessary to build a tight-knit group of support within the occupational therapy program since it's been found that males tend to open up and work better within groups that share a collective identity rather than to individuals.

In the third theme, participants noted that some patients in clinical settings preferred female occupational therapists due to gender stereotypes of the Philippine society associated with caregiving. This is echoed in the study of Jones (1997), wherein the majority of male clients believed female therapists were more caring than male

therapists. A study by Parish et al. (1990) also noted that some of their male participants had experienced refusal of treatment by their female patients because of their gender. This experience typically happened when the main focus of the interventions was the clients' ADLs (activities of daily living), as male students were often challenged when working with victims of sexual abuse or when they had to assist female clients with dressing (Barker et al., 2013).

It is important to contextualize that socio-cultural ideas regarding gender roles for men and women are still strongly held and perceived by certain members of Philippine society. As such, this might potentially make male occupational therapy students feel less equipped to utilize their natural approach or improve the profession through their unique perspective. Filipino male occupational therapy students are more likely to be placed in a culturally gendered workplace. While occupational therapy students, especially the participants of this study, are generally more progressive in viewing gender, during internship rotations, when students get a taste of their work as occupational therapists, some clients may still maintain their view that female occupational therapists are more favorable in terms of caregiving and treatment implementation.

The fourth theme highlights the self-reflective nature of male occupational therapy students. Through their experiences in the program, participants gained insights into their character, strengths, and weaknesses. They acknowledged that occupational therapy exposed them to new activities, techniques, and approaches, leading to personal growth and expanded horizons. Reflecting the importance of personal growth, a study by Bonsaksen and Kvarsnes (2016) explored the role performance of male occupational therapy students in Norway. The results of the study stated that male occupational therapy students had more roles with regard to their community, social, and civic life. Mirroring this, the participants recognized the need to adopt a proactive mindset, even if they felt discouraged initially. There was a general, optimistic view throughout the answers of the participants, wherein they admitted their shortcomings and emphasized the importance of active participation in different aspects of daily life, embodiment of desired behaviors, and continuous evolution and progress in the field of occupational therapy as they are aware of the help they provide to clients and the services they could offer to future clients.

Finally, on the fifth theme, the furtherance of gender inclusivity reveals a shift in perceptions regarding the gender imbalance in the occupational therapy field. Participants expressed a progressive mindset and rejected the notion that occupational therapy is exclusively for females. They emphasized that past norms and gender-based stereotypes are irrelevant in the profession. Participants argued that being a male in the occupational therapy program does not affect the experiences and learnings they gain; it ultimately depends on how they make the most out of their experiences. This theme suggests that the rising number of male students entering occupational therapy indicates a more inclusive profession for both genders. With that, the study by Barker et al. (2013) echoed that male students were cordially welcomed into the occupational therapy fieldwork setting, and the preceptors and team members expressed

appreciation for the chance to hear from different viewpoints. Inclined with this, Bohn et al. (2019) stated that there are perceived advantages of being a male occupational therapy student, including the ability to interact with colleagues and clients easily. This is backed by Barker et al. (2013), declaring that despite certain hurdles they may encounter, men have been found to establish relationships with male clients faster. The rise in the number of men who have entered the profession has proven that occupational therapy is viewed as a rewarding career for all genders. It was concluded that the majority of the participants agreed that the occupational therapy program is inclusive of both genders with regards to academic and clinical practice.

Limitations and Scope

The study is limited to male students' experiences working towards their bachelor's degree in occupational therapy. The research did not consider the experiences or perspectives of other individuals involved in the male students' educational program. Moreover, the participants' demographics did not play a role in determining the subgroups for focus group discussions, as these were assigned randomly by the authors. The study includes a small sample size ($n=9$), therefore full saturation was not achieved and only 80% data saturation was obtained. A larger number of participants may have offered more significant evidence to support the conclusions and other relevant areas regarding the problem statement. With regards to geographical distribution, the study did not see a balance in the number of participants from whom a majority came from Luzon, specifically the Region IV area. Therefore, future studies are recommended to have a more diverse, larger sample size.

Implications for Occupational Therapy Education

- The results of the study provide future students a glimpse of the experiences encountered by male occupational therapy students in the program.
- The research findings indicate the majority of male occupational therapy students perceive occupational therapy as an inclusive profession. Occupational therapy education programs should build upon this perception and promote a furtherance for gender inclusivity within the profession.

Conclusion

The research findings provide valuable insights into the experiences and perceptions of male occupational therapy students in the Philippines. The themes highlight various aspects of their journey, including their reasons for choosing occupational therapy, the opportunities and challenges they encountered, their introspection, and the furtherance of gender inclusivity within the profession.

In addition, the participants value the opportunities provided within the program to interact with diverse populations and develop essential skills. While they may face challenges related to gender biases, the majority of participants demonstrate a progressive mentality and perceive occupational therapy as an inclusive profession.

References

- Barker, D., Stack, R., Jakubovic, R., & Reed, N. P. (2013). The male occupational therapy student on fieldwork: Optimizing the experience. *Occupational Therapy Now*, 15.2, 11-12.
- Benenson, J., Apostoleris, N., & Parnass, J. (2006). The organization of children's same-sex peer relationships. *New Directions for Child and Adolescent Development*, 1998(81), 5-23. <https://doi.org/10.1002/cd.23219988103>
- Birioukova, A., So, K., & Barker, D. (2012). The male occupational therapist: Demographics, issues and recommendations. *Occupational Therapy Now*, 14.1, 18-20.
- Bodine, F. (2021, March 2). *Coding qualitative data*. GeoPoll. <https://www.geopoll.com/blog/coding-qualitative-data/>
- Bohn, Z., LeClerc, J., & Haskins, A. M. (2019). Experiences of six male occupational therapy practitioners at varying career stages: A phenomenological study. *Annals of International Occupational Therapy*, 2(3), 115–123. <https://doi.org/10.3928/24761222-20190314-02>
- Bomia, J.R. (1999). *The life experiences of male occupational therapists as it relates to career choice: A qualitative study*. (Publication No. 1395285) [Doctoral Dissertation, Grand Valley State University]. ProQuest.
- Bonsaksen, T., & Kvarsnes, H. (2016). Role performance and role valuation among occupational therapy students in Norway. *Open Journal of Occupational Therapy*, 4(1), 7. <https://doi.org/10.15453/2168-6408.1180>
- Braun, V., & Clarke, V. (2006). *Using thematic analysis in psychology*. ResearchGate; Taylor & Francis (Routledge). <https://doi.org/10.1191/1478088706qp063oa>
- Carandang, K.A. & Delos Reyes, R.C. (2018). *Workforce survey 2017: Working conditions and salary structure of occupational therapists working in the Philippines survey*. Philippine Academy of Occupational Therapists, Inc.
- Creswell, J. W., & Plano Clark, V. (2011). *Designing and conducting mixed methods research* (2nd ed.). Sage.
- Ferreira, G. P., & Almeida, M. C. de. (2022). Experiences and perceptions related to gender in the professional practices of male occupational therapists. *Cadernos Brasileiros de Terapia Ocupacional*, 30. <https://doi.org/10.1590/2526-8910.ctoAO22622984>
- Guest, G., Bunce, A. and Johnson, L. (2012) How many interviews are enough? An experiment with data saturation and variability. *Field Methods*, 18, 59-82. <https://doi.org/10.1177/1525822X05279903>
- Hennink, M. M., Kaiser, B. N., & Weber, M. B. (2019). What influences saturation? Estimating sample sizes in focus group research. *Qualitative Health Research*, 29(10), 1483–1496. <https://doi.org/10.1177/1049732318821692>
- Japanese Association of Occupational Therapists. (2017). *Occupational therapy in numbers*. <http://www.jaot.or.jp/en/resource.html>
- Jones, D. R. (1997). Perceived differences between male and female occupational therapists' treatment and other related gender issues. (Publication No. 4703) [Masters Thesis, Western Michigan University]. ScholarWorks@WMU.

- Maher, C., Hadfield, M., Hutchings, M., & de Eyto, A. (2018). *Ensuring rigor in qualitative data analysis: A design research approach to coding combining NVIVO with traditional material methods*. Sage Journals.
<https://doi.org/10.1177/1609406918786362>
- Majumdar, A. (2018). *Thematic analysis in qualitative research*. IGI Global.
<https://doi.org/10.4018/978-1-5225-5366-3.ch009>
- Miles, M. B., & Huberman, M. A. (1994). *Qualitative Data Analysis: An expanded sourcebook* (2nd ed.). Sage.
- Narayanasamy, M., Ruban, A., & Sankaran, P. S. (2019). Factors influencing to study medicine: a survey of first-year medical students from India. *Korean Journal of Medical Education*, 31(1), 61–71. <https://doi.org/10.3946/kjme.2019.119>
- Patton, M. Q. (2002). *Qualitative Research & Evaluation Methods*. Google Books.
- Parish, J., Carr, D., Suwinski, M., & Rees, C. (1990). Undressing the facts: The problems encountered by male occupational therapists. *British Journal of Occupational Therapy*, 53(2), 67–70.
<https://doi.org/10.1177/030802269005300208>
- Philippine Statistics Authority. (n.d.). *Provincial summary number of provinces, cities, municipalities and barangays, by region as of 30 June 2019*. PSGC.
- Pruthi, S., Pandey, R., Singh, S., Aggarwal, A., Ramavat, A., & Goel, A. (2013). Why does an undergraduate student choose medicine as a career. *National Medical Journal of India*, 26(3), 147-149.
- Sutton, J., & Austin, Z. (2015). Qualitative research: Data collection, analysis, and management. *Canadian Journal of Hospital Pharmacy*, 68(3).
<https://doi.org/10.4212/cjhp.v68i3.1456>
- Taylor, J. (1995). A different voice in occupational therapy. *British Journal of Occupational Therapy*, 58(4), 170-174.
<https://doi.org/10.1177/030802269505800409>