

1985 Eleanor Clarke Slagle Lecture

A Monistic or a Pluralistic Approach to Professional Identity?

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In my review of occupational therapy literature, professional identity seems to be one of our major areas of concern. Who are we, how do we define ourselves, what are we about? The issue of professional identity is important. Without a collective sense of self we cannot effectively deal with other factors, both internal and external, that do and will continue to influence our practice.

Professions can take one of two approaches to their identity: monistic or pluralistic (1, 2). Borrowing from philosophy and taking some liberties (3), these terms are defined as follows.

Monism is the belief that there is one basic principle that is the essence of reality: that all processes, structures, concepts, and theories can be reduced to one governing principle.

Pluralism is the belief that there is more than one basic principle: that everything cannot be reduced to a single principle.

Translated into a language more common to us, monism is the attempt to define occupational therapy by one of its elements or a facet of an element: for example, a philosophical statement, a legitimate tool, or a particular frame of reference. The element selected is viewed as the basic principle that governs all other elements. Because there is only one basic principle, a monistic approach to professional identity tends to be relatively static.

On the other hand, a pluralistic approach suggests a broader perspective. Pluralists feel that all elements of the profession must be taken into consideration. The whole can only be defined by all of its parts. Moreover, it should be defined in such a way that the ever-changing nature of the profession can be easily accommodated.

As a guide to where this presentation is going, I will

- Briefly outline the elements of a profession,
- Describe and assess a monistic approach to professional identity,
- Discuss some factors that lead to the consideration of a pluralistic approach, and
- Outline the rationale for the nature of a pluralistic identity.

My preference is pluralism, lest anyone think I intend to be totally unbiased here.

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The Elements of a Profession

The term *elements* refers to those components that constitute the substance of a profession (4–8). Thus, any group that describes itself as a profession has the following elements.

A Set of Philosophical Assumptions

This is a collection of beliefs about the nature of the individual, the relationship of individuals with their environment, and the goals of the profession. Philosophical assumptions are identified, developed, and analyzed through philosophical inquiry, not, it should be noted, through empirical research.

A Code of Ethics

This is a statement of various principles of human conduct. This code outlines the responsibilities and privileges of members of a profession in relationship to society, their clients, and each other.

A Body of Knowledge

This is a collection of various theories that serve as the scientific foundation for practice. Theory, as used here, refers to a description of a set of events. It is concerned with predicting how and under what circumstances these events occur and how they relate to each other.

The body of knowledge of a profession is made up of theories that are a) selected from a variety of sources because they have specific relevance to practice and b) developed by the profession.

As mentioned, the goals of a profession are outlined in its philosophical assumptions, whereas a profession's body of knowledge describes the means for reaching these goals.

Domain of Concern

This is a statement of those areas of human experience in which a profession has expertise and offers assistance to others. In occupational therapy these areas are often described as being made up of occupational performances (e.g., activities of daily living, family interactions, play/recreation, and work) and of performance components (e.g., cognitive, psychological, and motor functions; sensory integration; and social interaction).

Aspects of Practice

This is a statement of the sequence of events whereby members of a profession assist clients in problem identification and resolution. In occupational therapy, these aspects include screening, formal evaluation, intervention, and termination. All of these interactions include communication and documentation.

Legitimate Tools

These are the vehicles that practitioners in a given profession use to assist clients. The legitimate tools of occupational therapy are not well defined. This issue is addressed later.

A Linking Structure

This is a framework whereby theories are restructured into a form that makes them applicable to practice (9–15). Professions need a linking structure because the only function of a theory is to predict relationships. No action is suggested or recommended. Theories do not answer the questions of how they should be applied, when they should be applied, relative to whom, and so forth. Linking structures answer these questions and thus provide the practitioner with a guide for action. The linking structure we have in occupational therapy is usually labeled a “frame of reference.” We have a number of frames of reference, each of which addresses different components of our domain of concern. They help us identify what we should evaluate for and how to go about the process of evaluation, goal setting, and intervention.

Practice

This is the application of one or more linking structures (in our case, frames of reference) to meet the particular needs of each patient. This is what we do in the clinic, school, community, or wherever we choose to make use of our knowledge and skills.

Empirical Research

This is the study of people, things, and events through observation. It may be qualitative or quantitative in nature. The major types of empirical research in occupational therapy are a) evaluative, which determines the effectiveness of our various frames of reference, and b) theoretical, which develops and tests theories that are, or may become, part of our body of knowledge. These are two very different types of research that provide us with different kinds of information (16).

The elements outlined earlier are common to all professions. A profession without an ethical code, for example, would never be allowed to practice, at least not in our society; a profession without a set of philosophical assumptions, although a changing one, would be without direction.

Professions are complex and are made up of many elements. What is the best way, then, to go about the process of establishing professional identity? We are back to the major question raised earlier. Which is more prudent, a monistic or pluralistic approach?

A Monistic Approach

Some of the monistic approaches that have been suggested for occupational therapy are Human Growth and Development (17), Purposeful Activity (18, 19), Occupational Behavior (20), Adaptive Responses (21), the Ecological Systems Model (22), and Human Occupation (23). As mentioned, a monistic approach proposes that one of the profession’s elements, or a facet of an element, serves, or ought to serve, as primary. This element becomes the principle that governs all other elements. Structurally, a monistic approach usually takes the form of a comprehensive theory. As used in the context of a profession, a comprehensive theory

is a grand theory with broad parameters (24–26). One element, or a facet of an element, serves as the nucleus of the theory. A select number of concepts and postulates are derived from this nucleus and form the substance of the theory.

The following four assumptions are made about a theory: First, a comprehensive theory, when adequately stated, contains all the important content of the subordinate elements. Second, its structure allows it to serve as a guide to practice; no linking structure is necessary. The theory provides sufficient information for evaluation, goal setting, and intervention, regardless of a client's particular areas of function and dysfunction. Third, the theory is the sole valid focus of a profession's research endeavors. Fourth, a comprehensive theory gives a profession a unified identity.

Proponents of the various monistic approaches listed have each, in one way or another, recommended the development of a comprehensive theory. However, each has suggested a different theory, with a different element or concept as the nucleus.

Aside from the conflict inherent in so many different suggested monistic approaches, the idea of a single comprehensive theory raises the following critical issues.

1. A comprehensive theory tends to be exclusionary. Important aspects of a profession's practice may not be included. For example, if we decided that human growth and development should be the core concept of our comprehensive theory, how would we fit into that theory such things as dealing with diminished range of motion or edema? Moreover, who should decide what will be included and what will be excluded?
2. A comprehensive theory usually has a strong philosophical overtone (23, 27). The profession's body of knowledge and philosophical assumptions are often so intertwined that it is difficult to determine what is a theoretical statement and what is a statement of belief. Thus, scholarly activities may be difficult to pursue. For example, should one use the tools of empirical research or the tools of philosophical inquiry?
3. When a profession opts for a comprehensive theory, its members are placed in a constricted position. The comprehensive theory becomes so central and requires such a degree of loyalty that creative, divergent, and/or independent thinking may not be encouraged or even tolerated.

To give a historical example, if we had decided that our comprehensive theory ought to be based on the nuclear concepts of play and work, would Ayres' ideas about sensory integration have been accepted, both as part of our body of knowledge and as one of our frames of reference? Research undertakings are usually considered appropriate only when they are concerned with the elaboration or refinement of the comprehensive theory or its application in practice (28, 29). Research designed to test the validity of the theory is rarely suggested; in fact, it may not be considered.

4. A comprehensive theory, when well articulated, tends to be rigid; and by extension, the profession ascribing to that theory does also. The needs of society, new knowledge, and new ideas tend to be ignored. It is difficult to alter a comprehensive theory: if you add a new concept or postulate, the whole theory may need to be altered, which is a difficult task.

5. Occupational therapy is a diverse profession. We assist people in all age groups and who have difficulties in many areas of function. A comprehensive theory may simplify to the point that the diversity and the richness of our body of knowledge, domain of concern, and practice may be lost.
6. In simplification, a comprehensive theory may become so nebulous that it inhibits research. Global and ill-defined concepts (e.g., adaptive responses and purposeful activity) are difficult to operationalize. Only when a concept can be reduced to the level of a variable is the validity of a theory or the effectiveness of intervention based on that theory able to be determined.
7. Further, in simplification, a comprehensive theory may become so vague that it offers little guidance for practice. For example, the comprehensive theory of Human Occupation describes the individual as being an “open system,” influencing and being influenced by external stimuli. The individual responds to external stimuli, receives feedback, alters his or her behavior, gets more feedback, and the cycle continues. When all goes well, the patient becomes a more functional individual. The problem here is what external stimuli? When a therapist assists an individual who has an eating disorder (as opposed to an individual with third-degree burns), what external stimuli should the therapist make available? Does Human Occupation provide this information? Does any proposed comprehensive theory provide this information?
8. A comprehensive theory that is not exclusionary, takes into consideration the diversity of the profession, and is not simplistic has to be complex. In its complexity, it may become so intricate and labyrinthine that it is incomprehensible to any but the most dedicated scholars. Unless we have a comprehensive theory that is easily understood by all therapists, theory may become disconnected from practice. Not a happy situation to contemplate. We may indeed return to the time when it was acceptable to say, “My approach is eclectic.” Such a statement is often an expression of considerable uncertainty about the theoretical bases for one’s practice.
9. Finally, as mentioned, one of the major functions of a comprehensive theory is to give unity to a profession. If the deficits outlined earlier are not avoided, a comprehensive theory may provide an illusion of a unified identity but would serve no practical purpose.

A monistic identity, then, has many pitfalls. With that in mind, a pluralistic approach is another possibility. The following describes some of the factors that led me to consider such an approach. It is, if you will, a wandering in that direction.

Wanderings

The history of our profession has been used to substantiate most of the various monistic approaches identified earlier. That is a little hard to take. When history is used to support very disparate ideas, questions must be asked. We seem to have the idea that the original members of our profession were all of one mind about what occupational therapy ought to be.

What their collective beliefs were, if there ever was such an agreement, differs according to who is writing the history. There are many individuals currently engaged in the study of our history. Hopefully, their efforts will provide more accurate information about our past.

The understanding and appreciation of our history is important. However, to use it to substantiate a number of different ideas of what we are or ought to be is a questionable practice. In addition, the year 1917 is a long time ago. The knowledge, beliefs, and issues of that time are not the same as those of 1985.

Another factor that leads me to consider a pluralistic approach is an issue raised by Rogers (30). She suggested that one of our major philosophical questions is whether the goal of the profession should be the enhancement of occupational performances or the development of performance components. She implied that it had to be one or the other; that a choice needed to be made. Why must we make such a choice? Multiple goals for the profession may provide needed flexibility.

A third reason to consider pluralism is related to our lack of a common vocabulary. Everyone has their own definition for a particular term, has no definition at all, or uses the same term to label very different concepts. An example is the term *model*. It is used in several different ways in our literature. I have identified at least five, most of which are not clearly defined. In addition, the term is sometimes modified. Thus, we have conceptual models, theoretical models, practice models, and probably some I missed (22, 27, 31).

Let me give a few more examples. There are also no agreed-upon definitions for “theory,” “frame of reference,” or “taxonomy.” Hypothesis may refer to a conjecture or a postulate stated in operational terms. Philosophical assumptions are rarely differentiated from theoretical statements. And I could continue . . . the lack of a common vocabulary could mean many things: a disregard for adequate definitions, an attempt to label each idea as new, or a lack of interest in communicating with each other.

Another factor in the consideration of a pluralistic identity was a review of other professions. Those who, in the past, embraced a monistic approach seemed to experience difficulties. The classical example is psychiatry. From approximately the early 1950s until the late 1960s, psychiatry on the whole had one comprehensive theory: psychoanalysis. This theory was used to explain all problems in mental health—from psychosis to marital discord. Every problem was made to fit into the theory. Psychoanalysis, with or without some modification, was the treatment of choice. However, many people were unable or unwilling to engage in this type of treatment. Also, for many of those who did, the treatment was not effective. Society turned to other sources for help: behaviorism, various types of self-help and encounter groups, and psychopharmacology. Thus, psychiatry lost a good deal of credibility, patients, and money.

The fifth situation that prompted me to consider a pluralistic approach is the difficulty we have in designating and defining our legitimate tools (32–35). “Purposeful activity” has received the most attention. Yet, it has been defined so broadly that it includes just about everything and so narrowly that it includes little that we actually do. Then there are those who suggest that we change the label of purposeful activity to “occupation.” Our literature is replete both with attempts to define purposeful activity and documentation that we use other

modalities for intervention (2, 36, 37). There are no criteria for determining what is and what is not a legitimate tool for occupational therapy.

Finally, I suggest a pluralistic approach based on the observation of everyday practice. What occupational therapists actually do is very diverse. There does not seem to be any one unifying element. It could be that we have had a pluralistic identity for some time; that such a decision was made long ago in action but was never recognized or clearly stated. Therefore, the limitations of a monistic approach and the factors just outlined seem to suggest consideration of pluralism.

A Pluralistic Approach

A pluralistic approach to professional identity is based on the belief that no one principle or element can define a profession, that each part is distinct and different. There are several characteristics of a profession that support a pluralistic approach. Some of the major ones follow.

First, all elements of a profession are of equal importance. One is in no way subordinate to another. The tools of a profession, for example, are of no greater or lesser importance than the theories that underlie their application.

Second, it is the content of each profession's elements that differentiates one from another (38). The collective content of each profession is unique in its totality, not in its parts. In illustration, we share part of our body of knowledge with other professions, such as human growth and development; we also share some of our philosophical assumptions, such as belief in the holistic nature of the individual. Early childhood educators use activities as one of their major tools. The content of a given profession, its beliefs, knowledge, and skills, is unique only because members of that profession have mastered it in its totality. Members of other professions and the average person may understand parts, but not the whole.

Third, the contents of elements change over time; there are both additions and deletions. And there will be change. Professions evolve to take advantage of new knowledge, new ideas, and beliefs and to meet society's ever-changing needs. For example, the original members of the profession did not fabricate splints. No one mentioned learning disabilities when I was in school. Our understanding of the brain is changing daily. This fluid and constant state of flux is good and necessary. Without such modifications, a profession would stagnate, wither, and become part of the past. We are not what we were ten years ago nor are we what we will be ten years from now.

Finally, and related to the last point, professions are rarely of one piece. Incompatibilities of elements and content of elements are legion. For example, our recognized body of knowledge does not include theories regarding the properties of heat. Yet, some occupational therapists use heat as one of their therapeutic modalities. Analytic frames of reference are not really congruent with frames of reference based on learning theories. A profession usually attempts to bring unity to the contents of its elements. But just as all of the elements are apparently in symmetry, another change comes along that must be integrated.

To reiterate, all elements of a profession are of equal importance, professions are unique only in their totality, they are in a continual state of change, and there is always likely to be

incompatibility between elements and within elements. Because of these characteristics, a pluralistic approach to professional identity may be more in accord with reality.

The structure for articulation of a pluralistic identity must be loosely organized. Rather than the composition of theory, which by definition is closely knit, a taxonomy is proposed. As used here, taxonomy refers to schema for classifying and ordering a set of phenomena. There are, of course, many different kinds of taxonomies. I recommend a cluster taxonomy in which groupings are formed based on similarity of defined characteristics. The groupings suggested for a pluralistic identity are the elements of the profession. In other words, each element would be clearly defined, and under that major heading the content of each element would be outlined. Thus, for example, we would clearly define what we meant by a philosophical assumption and then list our various philosophical assumptions. The same would be done for our ethical code, frames of reference, and so forth. With such a schema, the content of each element is apparent. Incongruencies can be readily identified. Content can easily be added or deleted as circumstances dictate. Our identity would be all of our elements. And, as their content changes over time, our identity is modified.

The structure for articulation of a pluralistic identity may seem too simple, too plain. No mystery at all. But perhaps that is as it should be. There really is no need to pretend complexity and enigmas where there are none. A straightforward statement of who we are may serve us best.

A pluralistic identity gives us freedom to grow and progress. It gives us the opportunity to engage in practice and scholarly pursuits unencumbered by tradition, authority, or ideology. More specifically, it allows us to

- Analyze critically our philosophical assumptions,
- Select and/or develop new theories,
- Make changes in our domain of concern,
- Consider alternative legitimate tools, and
- Formulate more definitive and additional frames of reference.

A pluralistic identity may not be comfortable for everyone. It is certainly not a panacea, nor is it meant to be. But perhaps such an identity would prepare us to meet the needs of those who seek our help. Perhaps it can enable us to deal effectively with internal and external factors that will always influence our practice.

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