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## 2006 ELEANOR CLARKE SLAGLE LECTURE

# The World of Everyday Occupation: Real People, Real Lives<sup>1</sup>



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Everyday occupation is a primary means by which we organize the worlds in which we live. The phenomenological experiences of day-to-day life build meaning and community in our lives; yet everyday occupation is often “seen but unnoticed.” Cultural tendencies and invisible social forces contribute to the obscurity of the everyday and, in severe situations, to occupational deprivation. The purpose of this Slagle lecture is to raise awareness of the complexity and “delicate layerings” of everyday occupation, its theoretical and conceptual underpinnings, the consequences of severe occupational constraints to health and well-being, and the essential relevance of everyday occupation to occupational therapy and occupational science. Everyday occupation related to food is probed in depth to illustrate the richness of day-to-day living. Occupational therapy personnel are encouraged to gain deeper understandings of the importance and meaning of everyday occupation in the lives of clients and the general public, thereby helping people find value in their everyday practices.

Hasselkus, B. R. (2006). 2006 Eleanor Clarke Slagle Lecture—The world of everyday occupation: Real people, real lives. *American Journal of Occupational Therapy*, 60, 627–640.

**M**y roots are in the heartland of the United States. I was born in Wisconsin and have lived there all my life. Wisconsin is home to me. But “home” to me throughout my career in occupational therapy has always been the concept of **everyday occupation**. By *everyday occupation* I mean the phenomenology or lived experiences of day-to-day life (Pollio, Henley, & Thompson, 1997).

Everyday occupation is not necessarily occupation that occurs every day; it may, but it also may not. But even when it is less frequent, what I call everyday occupation is embedded in or drawn directly from those regular, daily occupations of our lives. An example of such a regular, daily everyday occupation might be preparation of a meal. A variation of this everyday occupation is preparation of a holiday meal. By my definition, even though the holiday meal is something special and does not occur daily, it still represents a form of everyday occupation because of its embeddedness in the context of daily life. Everyday occupations are all part of the rhythms of daily life; they are the occupational fabric of our everyday experiential worlds.

Everyday occupation is a primary means by which we organize the worlds in which we live; the intermeshed patterns of ordinary occupations are what give shape to our daily lives. I propose that it is around these features of everyday living that we build meaning and community in our lives (Hasselkus, 2002). And yet, the everyday occupation of people is often “seen but unnoticed” (Garfinkel, 1964, p. 226).

The purpose of this Slagle lecture is to highlight this seen but often unnoticed aspect of our occupational lives. By raising our awareness of the beauty, complexity, and “delicate layerings” (de Certeau, 1998, p. xvi) of everyday occupation, by sharing the theoretical and conceptual literature on everyday occupation, by describing some of the intriguing and compelling research on everyday occupation that is being carried out inside and outside our profession, and by recognizing the soul-wrenching state of humans for whom little meaningful daily occupation

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<sup>1</sup>The idea for this title came from a phrase written down in my notes—“real people living real lives”—and attributed to Elliot G. Mishler; neither he nor I, however, can remember its origin.



**Mary Cassatt, American, 1844–1926, *The Child's Bath*, 1893**

Oil on canvas, 39½ x 26 in., Robert A. Waller Fund, 1910.2. Reproduction, The Art Institute of Chicago. Photography © The Art Institute of Chicago.

exists, I aim to demonstrate the essential relevance of everyday occupation to our quality of life and to our world of occupational therapy and occupational science. To that end, I hope to promote understandings of everyday occupation as a therapeutic entity, as a focus for teaching and training, and as an area of research inquiry with vast potential.

When our son was 8 years old, he had a school assignment to write a paragraph describing his “home.” John’s short paragraph included the following sentence about home: “At night I lie in bed and listen to my mother sewing, and my dad brushing his teeth.” What a lovely tribute to the centrality and meaning of everyday occupation in our lives. Even to an 8-year-old little boy, the meaning of life at home is embodied in the everyday occupations of the household—his mother sewing and his dad brushing his teeth.

## Everyday Occupation: “Seen But Unnoticed”

Kathleen Norris (1998) says, “It is in ordinary life that our stories unfold . . .” (p. 77). In other words, the familiar

world of everyday life is what we know as the *real* world; familiar scenes of everyday life are what we perceive as normal, what we hold in common with others, and what we take for granted (Garfinkel, 1964). Everyday life provides the “points of departure and return” (Garfinkel, 1964, p. 225) for every kind of variation in daily life we impose on ourselves; we say things like, “Oh, it’s so good to get back to normal” after having house guests, or after a period of remodeling, or after a time of travel—all temporary departures from our usual routines. Everyday life is like an anchor in our lives. A fourth century scientist, philosopher, and theologian, Gregory of Nyssa, is quoted as saying, “Let us remember that the life in which we ought to be interested is ‘daily’ life. We can, each of us, only call the present time our own” (cited in Norris, 1998).

Everyday life is also a paradox in our lives. The small behaviors that make up the realm of daily life for each one of us are more than what we have in common with others; they also represent our own exquisite individuality and distinction. We may all brush our teeth every day, perhaps more than once a day, but it’s probably fair to assume that we each have our own particular way of doing this tooth brushing. So on one level, we are all doing the same thing, but on another level we are *not* doing the same thing. I believe that the vast majority of occupational therapy that addresses daily life issues and skills has been based on the assumption that we are doing basically the same things, all of us, and therapy personnel have often not delved deeper to get at the singularities embedded in individual daily life. And yet, as Michel de Certeau (1998) has said, understanding of these ordinary activities “comes to light only in the details” (p. ix).

### *Anonymity of the Everyday*

Herein lies one of the reasons that everyday occupations tend to be “seen but unnoticed.” They are *seen* as commonalities across people, countries, and even cultures—something we all do. And commonality leads to lack of distinction, loss of individuality and personality. Kort (1996) says the culture is obsessed with commonalities and unities, and will produce them in order to “simplify and manipulate the world” (pp. 98–99). Rather strong words—that the overall cultural tendency in our world is to seek unity and social cohesion in order that we may render the world manageable and within our control. Kort further states that this tendency leads to the “anonymity of the everyday” (p. 105).

I see some truth in Kort’s declarations, and I see tendencies toward this search for unity and commonalities within our profession of occupational therapy and our discipline of occupational science. In our efforts to define our world of practice, we create and re-create unities in the form

of categories, definitions, and modalities. We strive for ways that we can reduce what we do to simple, understandable terms—terms that are accessible not only to physicians, nurses, social workers, and other health professionals but also to all the lay people, insurance people, sales people, government employees, etc., with whom we work and interact. In other words, we strive for concepts and terms that are common denominators.

*Creating occupational categories.* Early efforts to define our professional domain divided the concept of occupation into three dimensions—work, leisure, and self-maintenance. These three dimensions were often depicted as three large intersecting circles. Sometimes the intersections of the circles were elaborated to portray types of occupation that overlapped categories, such as the occupation of an artist, which might constitute an overlap between work and leisure. Primeau (1996a, 1998) has argued that schema such as these reflect simplistic notions of everyday occupation; she used household tasks to demonstrate the many meanings of occupation that are ignored by such models. Similarly, Lobo (1998) examined the meaning of leisure, especially its interrelationship to what we call work, revealing complexities well beyond the leisure concept in the model of three basic dimensions. Primeau and Lobo were ahead of me in their expanded thinking. For years in my university teaching, I clung tenaciously to what I now call the “big three”; I used these three categories of *work*, *self-maintenance*, and *leisure* to organize my teaching and writing about occupation. This model offered me a way to manage classroom content and helped me articulate the ideas I was trying to present.

In 2002, the American Occupational Therapy Association published the *Occupational Therapy Practice Framework: Domain and Process* (American Occupational Therapy Association [AOTA], 2002). By this time, my own thinking had changed, and I found myself wishing that this important document had gone further outside the box in terms of our conceptualization of occupation. Yet, at least the new breakdown of occupational categories in the framework did begin to offer nuances and a hint of the complexities inherent in the performance areas. The *Framework* elaborates the categories of occupation beyond the “big three” to include *activities of daily living*, *instrumental activities of daily living*, *education*, *work*, *play*, *leisure*, and *social participation*; *performance skills and patterns*; *contextual components* such as temporality; and *cultural* and *social* demands are sub-listed.

*The danger in categories.* If we look across these two models, we can see some progression toward increasing complexity. Yet models, by their very nature, reach for the inclusive, the common denominator, unity. Is this bad? No, of course not. We are searching for ways to define our territory and ourselves and to understand the essence of our pro-

feSSION, and we are looking for ways to communicate with colleagues and clients. Our culture demands this of us. But the models are paradoxically both helpful and dangerous; they can mold and shape us in ways that are defining but also limiting. Once we internalize the categories of occupation, we begin to fit people and their needs and our own skills into those categories. “What are you seeing that patient for?” “ADL.” Our worlds of therapy seem much more manageable when we can describe and explain things in clear, simple terms. In our use of the big categories, we risk losing sight of the unique contexts and individual small behaviors of everyday life and everyday occupation that make up those sweeping categories.

So one reason that everyday occupation is often *seen but unnoticed* is because we have a penchant for pulling things together into entities that give us a sense of unity, into categories. What is *seen* is the common denominator, the anonymity of the everyday; what are often *unnoticed* are the complexities and singularities of the everyday.

### *Powerlessness of Words*

A second reason that everyday occupation is often seen but unnoticed is the matter of social power. *Words* have a lot of power—or not. The words that are used to describe everyday occupation in the English language are words without power. I’m not sure if this applies to other languages as well. But think of the words we use in English to describe what we do in our daily lives: *routine*, *mundane*, *ordinary*, *commonplace*, *run-of-the-mill*, *usual*, *fundamental*, *elementary*, *familiar*, *basic*, *taken for granted*. These are not words with power in our lexicon. These are words that are humdrum, boring, unexciting. These are words to skip over so we can get on with the stimulating and stirring parts of language and life.

*Devaluing the ordinary.* Serious and wide-ranging consequences can result from the powerlessness in the words we use to describe everyday-ness in our lives. As an example, for years in our society, women’s work in the home was referred to as routine, day-to-day, ordinary. Daniels (1987) describes the cultural separation that emerged between “the public world where men went out to work and the private world where women remained at home to raise a family” (p. 404). Work in the private world became largely invisible, fell outside the boundaries of what was considered valuable production, and seemed only to be noticed when absent (Daniels, 1987; de Certeau, Giard, & Mayol, 1998; DeVault, 1991; Wadel, 1979). Giard (1998) quotes the words of a song sung by women in Quebec: “Mom don’t work ‘cause she got too much to do” (p. 156). What women have “to do” has not been considered work. As a corollary, work in the private home domain has also been regarded as

less important than that in the public domain. And as Daniels suggests, the lesser importance ascribed to work in the private domain led to women themselves devaluing their work even more generally: “The lack of validation attendant upon women’s work in the family, in volunteer worlds, and in women’s occupations affects the definitions women make of their own efforts” (p. 408).

My mother brought this realization to me when she was dying; we were talking about the funeral arrangements she wanted to have, and she made a comment that had a poignancy I still feel as a daughter and a woman. She told me that she had already written her obituary and shared with me some of what she had included about her life, a not unimpressive list of volunteer activities in the community and church, as well as teaching mathematics part-time in the junior high school. Yet, near the end of our discussion, she summed up her life by saying, and I quote verbatim, “Of course, it isn’t as interesting as a man’s.” Women have, perhaps, been particularly affected by the invisibility of the everyday in our society; women, like my mother, internalized this invisibility and translated it to mean that what they did with their lives was not worth noticing very much, could be skipped over in deference to other more exciting and important aspects of life.

*The everyday as an “immense remainder.”* Michel de Certeau (1998) refers to the *language* of everyday practices as a “murmuring” and a “chiaroscuro” in life (pp. 199–200). He says ordinary practices do not “speak”; they are part of what he calls an “immense remainder,” meaning they are part of our experience that is not symbolized in our language and is, thus, relegated to obscurity and the background. He gives as an example the shopper in the supermarket who must synthesize what is in the refrigerator at home; the tastes, appetites, and moods of family or upcoming guests; the best buys and their possible combinations with what is already on hand at home, etc. The synthesis of these various elements takes the form not of discourse, however, but of the decision itself, the act and manner in which the opportunity is seized. The shopper does not talk through this everyday shopping practice, but rather the shopper pretty much silently decides and acts. Because of the paucity of language available to describe the everyday, the practices of daily life end up marginalized, belonging to no one, being without singularity or individual owners—an immense remainder.

### *The Problem Framework in Therapy*

The cultural tendency to seek unity and commonality in our everyday worlds, plus the powerlessness and the paucity of language used to describe everyday-ness in our lives, are, thus, reasons why we may see but not notice the essential nature of everyday occupation in our therapeutic work.

We don’t want to focus on what we perceive to be the ordinary, already familiar, routine aspects of life. We don’t want to be identified with the “immense remainder” of life. We want to be respected; we want to have a voice that will be listened to, not skipped over, in the social, educational, and medical hierarchies that exist in our worlds of therapy; we want to be considered highly skilled, not do-ers of the ordinary and mundane, or that which cannot be well articulated. Our core values and very essence may be embodied in everyday occupation, but these values and this focus are not likely to generate attention or respect from the powers of influence in our society.

One of the approaches we have taken historically in our development as a profession has been to conceptualize the everyday within a *problem* framework. We have linked our focus on occupation to a context of disability—making everyday occupations part of a problem. In the everyday world as a problem, the commonplace became not only seen, but also noticed (Garfinkel, 1964). With the link to disability, what was basically familiar and routine became unfamiliar and challenging; with this emphasis, occupational therapists found themselves able to develop and demonstrate high-level skills and to gain a sense of self-respect as well as respect from colleagues and clients. But we must recognize that with this link came, also, the medical perspective and the illness model as determinants of many aspects of the profession. In such a situation, the everyday world may become an abstraction—a world described by categories and unities instead of “the actualities of the everyday experience” (Smith, 1987, p. 89).

The premise of this Slagle lecture is that the small experiences of everyday life and everyday occupation have complexity, beauty, meaningfulness, and relevance to health and well-being that belie their aura of ordinariness and routine. For in the unique and small experiences that comprise each individual’s daily life, we, as occupational therapy personnel, can derive deep understandings about the nature of the lived occupational experiences of human beings and about human occupation more broadly. And these understandings can help dissolve the anonymity of the everyday and give voice to the “immense remainder” of human experience that, at present, does not speak. Such understandings can embrace and have relevance to people with and without disabilities.

## The Small Experiences of Daily Life

The 20th-century sociologist Erving Goffman (1967) used the phrase *small behaviors* to describe little external signs of social engagement—glances, facial movement, gestures, body positioning, and verbal utterances (p. 1). His attention to these small behaviors of social interaction “that most of us seldom notice” has been referred to as brilliant (Cahill,

1992, p. 194). Goffman's writings (1959, 1961, 1963, 1967) address themes such as behavior in public places, stigma, forms of talk, the presentation of self in everyday life, interaction rituals, and impression management. Goffman's analytical descriptions of even the most fleeting of social interactions help one realize just how "immense" the remainder of human experience really is. I'm using the parallel phrase *small experiences* to refer to the many seen-but-seldom-noticed commonplace small experiences of our daily occupational lives—our everyday occupation.

The small behaviors and experiences of everyday occupation can be hugely important in therapeutic practice (Hasselkus, 1998). They can be the very essence of practice in some settings and with some clients. Think of children with autism, people with dementia or deep depression, and patients in semiconscious states. And these small behaviors can be the backbone of evidence for therapeutic effectiveness in our reporting—if they are not only seen but noticed, and if they are given voice. For, in reality, these nuances of everyday occupation offer, in these contexts, powerful evidence that our practice *does* make a difference.

### *Small Experiences and Family Research*

A scholarly focus on the small behaviors and experiences of everyday life is found at the Center on Everyday Lives of Families (CELf), housed at the University of California–Los Angeles, Department of Anthropology, with branch centers in Sweden and Italy [retrieved July 20, 2005, from <http://www.celf.ucla.edu>]. The list of papers coming out of the UCLA center is provocative and very relevant to us as occupational therapists; a primary focus on the small experiences of everyday occupation is apparent. A few titles of research papers in progress, part of a much longer list, include

- Habits of the Hearth: Children's Bedtime Routines as Relational Work
- Children in the Home, Toys in the Tub: Middle-Class Contexts of Work and Play
- Learning About Work at Dinnertime: Language Socialization in Dual-Earner American Families
- Doing Things With Play: The Play of Everyday Life
- Space, Time, and Activities in the Everyday Lives of Working Families
- Establishing Ties to the Community: Gay Fathers and the Work of Alliance Building in Everyday Family Life.

The UCLA center integrates scholars across four sub-fields of anthropology, along with scholars from the fields of applied linguistics, education, and psychology. One of its four primary goals is to generate "public dialogue on how working families accomplish routine family and household activities and the centrality of these activities for building family and community relationships and world views." I

can't help but think that an occupational science researcher would be a perfect addition to the team.

### *Small Experiences and Occupational Therapy*

In occupational therapy, we, too, have begun to create new knowledge about everyday occupation through our practice and research. My own research has been on the everyday experiences of caregiving—both of family members caring for elderly family members (Hasselkus 1989, 1992, 1998) and, with Virginia Dickie, of occupational therapy personnel caring for patients and clients of all ages (Hasselkus & Dickie, 1994). Also in our literature is research on the everyday experiences of mothering for children at different stages of childhood (Francis-Connolly, 2000) and for children with disabilities (Larson, 2000; McGuire, Crowe, Law, & VanLeit, 2004). The daily occupations and routines of persons with schizophrenia (Suto & Frank, 1994), spinal cord injuries (Thibodaux, 2005), and Alzheimer's disease (Josephsson, 1994; Nygård & Borell, 1998; Öhman & Nygård, 2005) have been studied, as have the lifestyle patterns of well elderly (Carlson, Clark, & Young, 1998; Jackson, Carlson, Mandel, Zemke, & Clark, 1998). The nature and meaning of play in childhood has been studied cross-culturally (Bazyk, Stalnaker, Llerena, Ekelman, & Bazyk, 2003). Others have studied the construction of self-care routines in mothers with disabled children and in older non-disabled women (Kellegrew, 2000; Ludwig, 1998). In the past decade, the American Occupational Therapy Foundation has offered two conferences on "habits" (see special supplement issues of *The Occupational Therapy Journal of Research*, Vol. 20, Fall 2000, and *OTJR: Occupation, Participation and Health*, Vol. 22, Winter 2002). This sampling of research in our own profession provides ample testimony to the potential breadth of topics on everyday occupation that have relevance for occupational therapy.

### *Everyday Occupation Related to Food*

Because the concept of "everyday occupation" is so broad, I will narrow my focus at this point to one aspect of our daily lives, that is, to everyday occupation *related to food*. I will use this food-specific focus to illustrate the singularities and many-faceted nature of all everyday occupation. Food, after all, plays a central role in the everyday lives of most, if not all, people (de Certeau et al., 1998; Silva & Nelson, 2005).

My sister Eleanor was a poet. One of her poems is entitled "Oranges, Really," and it is a poem that describes an amazing array of distinguishing characteristics of this common household food. I think the "Really" part of the title is intended to help us give more than the usual attention to this ordinary food of our daily life, to not only see but to notice, to begin to appreciate all the sensations and visual stimulants

present in this common fruit that we can find any day at the grocery store as we go about our everyday occupations.

## ORANGES, REALLY

ELEANOR RISTEEN GORDON

*the fruit the color*

*the color the fruit*      ORANGE

*I touch the assembled heads of oranges,*

*the thickened stippled skin.*

*How beautiful the names of oranges:*

*Sunkist, Sun Treat*

*Seald Sweet*

*Pure Gold*

*Bob White, Blue Goose, Indian River.*

*I bask in their fragrance,*

*lift from red tissue nest*

*pressed breast-round*

*juice gone solid in my hand,*

*navel-tucked.*

*With muffled white sound,*

*thumbnail in orange hide*

*splits*

*soft-lined peel from fruit;*

*tiny membrane pockets burst and squirt—*

*jets of dimestore orangedrink machines.*

*The orange in halves:*

*sweet vulvas of orange sections*

*force their shapes upon each other.*

*I bite—*

*orange smacks my tongue,*

*orange floods the gates of my throat.*

So, what are some of the powerful attributes of the humble orange? Color. Shape. Taste. Outside and inside. Solid and liquid. The whole and the parts. Soft and not so soft. Scent and fragrance. Beauty. Sensuousness. All that in the common ORANGE . . . Really! So, the poem awakens us to the complexity and beauty of one very small part of our everyday world experience—a piece of fruit, an orange. Therapeutically, the orange is a virtual treasure trove of sensory stimulation. Selecting and picking up an orange, holding an orange, peeling an orange, breaking it into sections, bringing the sections to the mouth, biting off pieces and chewing and swallowing—all accompanied by the sights, sounds, tastes, and fragrances of the orange—is perhaps therapy at its finest.

Now that we have given it our attention, the orange no longer seems ordinary and mundane; it seems almost elegant, full of sensations to be experienced and appreciated, offering opportunities for a myriad of small behaviors and experiences. My sister has given the orange “voice,” enabled the everyday to “speak.”

*Contextual layers of eating.* I have just recently worked with a colleague from the University of Ulster, Northern Ireland, to analyze data from a study of family caregivers caring for family members with dementia (Hasselkus & Murray, in press). The data are from telephone interviews conducted with family caregivers in Wisconsin, and one question we asked each participant was “Can you think back and describe a very satisfying experience in your caregiving?” The data were narratives of caring for family members with dementia, and one of the stories related to food was the following:

Last year for Thanksgiving, my father hadn't been eating, and we went to pick him up [at the nursing home] and brought him to my house for Thanksgiving dinner. My father had always loved prime rib, so I had fixed prime rib for Thanksgiving dinner. I had turkey and everything, but I also had prime rib. When I fixed my father's plate, I said, “Dad, this is prime rib,” and I put a piece in his mouth. My father tasted it, and for some reason, he just started grabbing, reaching for the plate. I could not get it in him fast enough. He started chewing, and he hadn't chewed in almost a month. That was the most [pause], it was the most uplifting . . . it was just a miracle, that's about all I can say. That made Thanksgiving beautiful.

Many people with cognitive impairments, as the father in this caregiver's story, lose both the pleasure previously found in eating and the ability to carry out the eating process (Volicer et al., 1989). Occupational therapy personnel who work in geriatrics may have experienced firsthand the agonizing ethical struggles that result in such situations—questions related to feeding tubes, force-feeding, autonomy (Åkerlund & Norberg, 1985; Corcoran & Gitlin, 1996; Gubrium, 1975; Kane & Caplan, 1990; Moody, 1992). In such situations, eating is reduced to a purely consumptive activity—without joy or pleasure for anyone. The breakthrough witnessed by the daughter in the prime rib story represents the very satisfying experience for her of finding a way to restore her father's occupation of eating to one that offered both consumption of food and apparent pleasure. The writer Wendell Berry (2002) said in his agrarian essays, “The pleasure of eating . . . may be the best available standard of our health” (p. 326). To this daughter, her father's small behaviors during that Thanksgiving meal—chewing and swallowing, grabbing for the food—reflected a rare moment of relative well-being and health in his life. And as she said, “That made Thanksgiving beautiful.” So there, too, is the “beauty” in everyday occupation—everyday occupation deeply embedded in the family's unique history, individual preferences, memories, and familiar routines; everyday occupation far beyond the simple act of getting food into the body.

In another study of occupation and dementia, I focused on satisfying and dissatisfying experiences of day-care staff members, using a sample of day-care centers in Wisconsin (Hasselkus, 1998). Here is a story from a day care staff person about a participant with dementia, and this story, too, is related to food:

This particular client would become very agitated being with the group, especially at mealtime. And he was not eating well. What we had suggested doing was to bring him back into the office area where it's somewhat more quiet . . . And when he would be in a quiet, more controlled situation, he just did very well . . . He would actually sit down with his meal and bless himself and his food . . . he ate much better and he was even concerned, you know, if he would spill something, and just seemed to be much more in touch with reality . . . This was very satisfying, you know. . . he was very much in contact with his past and the real situation of sitting down to eat a meal.

In the previous story, the father's moment of relative well-being was likely *facilitated* by the familiar routines of the family around the dinner table at Thanksgiving. Alternatively, being with others at mealtime increased this client's agitation and led to him "not eating well." His was a different history, a history of being accustomed to eating alone, or at least in a very quiet environment. He had a routine that he was used to following, including a blessing for himself and the food—a routine that was totally lost in the group meal situation of the center. In the quiet of the office, this man was able to connect with his meal, carry out his usual familiar routines, take care of himself, and eat better. In Warde and Hetherington's (1994) study of routine food practices, they make the statement that "For some people, what and where they eat is a very conscious expression of their personal identities and style of life" (p. 769). The day-care participant, upon moving to the office to eat in a space of relative quiet, was able to live, once again, the rituals, habits, and routines still held in his memory from days gone by.

Kathleen Norris (1998), a writer on the everyday, speaks of the humble, daily occupations such as washing the body, drinking enough water, and, I would add, eating nutritious food, as "acts of self-respect" (p. 40). And it is around such small acts of self-respect during the day that we build quality in our daily lives. For the man at the day care center, sitting by himself in the office transformed the everyday occupation of eating a meal into, once again, an act of self-respect—an occasion that allowed him to reconnect with his past and to reenact the meaningful small experiences of the past in his present life with dementia.

*The making of a meal.* Another kind of everyday activity related to food is the making of a meal—meal preparation. In occupational therapy, a study of meal preparation is

being carried out by researchers from three countries—New Zealand, Thailand, and the United States (Hocking, Wright-St. Clair, & Bunrayong, 2002; Wright-St. Clair, Bunrayong, Vittayakorn, Rattakorn, & Hocking, 2004; Wright-St. Clair, Hocking, Bunrayong, Vittayakorn, & Rattakorn, 2005). The study examines the experiences of older women as they carry out food preparations for a holiday. The researchers used focus groups to interview the women and to elicit narratives of their experiences in preparing and sharing foods—at Christmastime in New Zealand and the United States, and for the Songkran water festival in Thailand.

The New Zealand component of the study included a sample of 16 women (Wright-St. Clair et al., 2005). The four gold standards for the food preparation, derived from the data, were preparing home-cooked foods; following traditions of making foods from scratch; being thrifty and practical in shopping for food; and preparing and serving food in abundance (having leftovers was definitely required). Long-used family recipes held special place in the planning. Ordinary everyday cooking objects sometimes held special significance, such as great-grandmother's wooden spoon or mixing bowl. The food preparation, in a way, enabled the women to relive their memories of working together with several generations of women kinfolk in the kitchen and provided opportunities to come together and share once again in the work of making the meals.

In the New Zealand study, holiday food preparation and sharing were also ways to make and remake the family identity. Who they were as a family unit and what they ate when they came together at Christmas in New Zealand connected families to their cultures and histories. Adaptations occurred over the years as the women cleverly mixed the old with new and different foods, sometimes starting new traditions. As families expanded and grew more complex with marriages, divorces, remarriages, extended families, etc., the women struggled to meet the needs of all; "gathering together over home-cooked food" remained the focal point for the family Christmas.

Giard (1998) states, "*doing-cooking* is the medium for a basic, humble, and persistent practice that is repeated in time and space, rooted in the fabric of relationships to others and to one's self, marked by the 'family saga' and the history of each, bound to childhood memory just like rhythms and seasons" (p. 157). The international study of food occupations by our colleagues is an imaginative in-depth study of the meaning of food and holiday traditions as relates to the women's identities, family identities, blending of old and new rituals, and food preparation as a source of self-validation. We are way beyond food as mere sustenance here.

We can probably *all* think of our own holiday traditions, our own adaptations across the years to what we knew as children, how we continue certain traditions and incorporate new ones, which traditions are most valued and which are not. Togetherness around the family table is the subject of a book by Doris Christopher (1999). In the chapter on holiday meals, Christopher quotes one friend as saying, “New recipes are fine for any other day . . . but on Thanksgiving, I want those yams with marshmallows, and the Jell-O salad” (p. 102). For me, I want the turkey stuffing made from my mother’s recipe—no way would I substitute a package of stuffing mix, nor would I substitute an exotic stuffing of apricots or sausage. Our own feelings about the concept of “made from scratch” and “homemade” foods, or, what in my case constitutes “real” stuffing, can be powerful.

And what does this all mean for the older woman who becomes disabled? As occupational therapists, we might be advising her to no longer do much cooking, to take shortcuts, to use more prepared foods, to let some other member of the family do most of the work now, to give up some of the usual family traditions, etc. Do we appreciate the emotional depths of these changes we are recommending? What can we do, with our expertise in homemaking skills, to better help such a client weather this huge wrench in her life patterns and identity within a family?

*The presentation of food.* Other aspects of food-related occupations to consider are the small experiences associated with the *presentation* of food. By “presentation” I am referring to everything from the way the food is arranged and garnished on the plate, to the way the table is decorated; the use of paper plates versus china plates; eating outside on a picnic table or inside at the dining room table; eating at home or in a restaurant, at a table or at a counter, by a window or in a corner against a far wall. The food items on the menu and their presentation constitute a system of messages and codes for food-related occupations: formal or informal; special or ordinary; fancy or plain; home-cooked or carryout; a lot of work or easily put together (Delamont, 1983; Douglas, 1972). Presentation made all the difference in the world to the participant at the day care center who was offered the opportunity to eat alone in the office instead of in the common area with all the other participants.

In the introduction to Wendell Berry’s book on agrarian living, we are reminded that “Food, rather than simply being fuel, is the most concrete and intimate connection between ourselves and the earth that exists” (Wirzba, 2002, p. xviii). Maybe. In Gubrium’s (1975) early ethnography of nursing home life, he describes the presentation of food in the dining room at Murray Manor:

At the Manor, clientele are not aware of the menu for any meal before they actually see their food on the table . . .

When food trays are about to be distributed, a relative hush comes over the dining room . . . entrees are placed on heated plates that have covers. Clientele don’t know what the main course is until they either remove the cover themselves or hear the comments of others in the room who already have done so. (pp. 172–173)

To have one’s meal arrive under cover, so to speak, and to have no idea what one is going to be eating until the cover is removed, seems a practice that eliminates all personal associations to the food. Probably little or no “intimate connection” exists between the residents and Mother Earth in settings such as Murray Manor.

A practice that distances the “eater” from the food even more is that found in a different institutional setting—namely, a prison. About a year ago, a group of prisoners in one of Wisconsin’s maximum-security prisons produced a videotaped program with the title “You Don’t Want to Live in My House” (NEWIST/CESA 7, 2005) (Available from NEWIST/CESA 7, 2420 Nicolet Drive, Green Bay, Wisconsin 54311; e-mail [newist@uwgb.edu](mailto:newist@uwgb.edu); telephone 1-800-633-7445). This video is one in which men in the prison provide firsthand accounts of the experience of everyday life in a maximum-security prison. Their hope is that the video will act as a strong deterrent for young people on the outside who are leading lives that put themselves at risk for imprisonment. One section of the videotape focuses on the “Chow Hall.” The prisoner–narrator describes how the food trays are handed to the prisoners *through a hole in the wall*: “You don’t see who serves it, you don’t see who prepares it, you don’t get to say what you want.” Surely such a procedure maximizes the sense of *disconnection* between the person eating the food and the world from whence the food comes. Additionally, the routines and rules of the prison, including those of the Chow Hall, exemplify a quintessential level of commonality and anonymity in the everyday. As the security director states on the videotape, the routine is the “same thing, day in, day out, 24 hours a day.” And, as the prisoner in the video states, they get the same institutional food “day after day, week after week, year after year”—and for some, “it’s for the rest of their lives.” The food routines of the prison reflect the beliefs that keeping everything the same for everybody, day after day and year after year, will help create social stability among the prisoners and staff, and that such stability will keep the prison and its inmates manageable and under control.

In sharp contrast to prison life, a different situation of severe constraints in everyday occupation exists for people who are homeless. To survive as a homeless person *requires* individual ingenuity to get through every hour of every day. In a book I discovered, titled “Hidden Kitchens” (Silva &

Nelson, 2005), a homeless man named Jeffry describes his daily life on the streets of Chicago: “When you’re homeless and living on the streets, you’ve got to look around . . . It’s called trailblazing. You’ve got to blaze the trail, you know” (p. 22).

Trailblazing has taught Jeffry where he can get a free cup of coffee. He knows who will give him a doughnut and who won’t and when they’re giving free haircuts in the parks. On Sundays he knows which churches are serving and what the Salvation Army is offering for supper. Some nights Jeffry would slip into Cook County Hospital. He describes his routine at the hospital as follows:

You go in coughing, you know, and they give you one of those little plastic bracelets. And when they call your name, you don’t answer. And you got a band around your wrist, so now you can sit there half the night and go to sleep or look for a hospital microwave to cook your cup o’ noodles in . . . They’d say, “Have a cup of coffee,” and I’d see there was a microwave in the lunchroom . . . Mostly I just wanted a place to pop my popcorn. Sometimes I survived for days on popcorn. (pp. 22–23)

There’s no keeping everything “the same for everybody” here, as there was in the prison. Instead of having to bow to the demands and needs of an institutional system, Jeffry has *no* system in place around which to build his everyday occupation; he must create some kind of system for himself, make bits and pieces of the existing infrastructure work for him, satisfy his wants and needs to the best of his ability—for food, warmth, a place to sleep, and a microwave in which to make popcorn. The human geography of Jeffry’s everyday world is complex and laden with risk at the level of his very survival. His network of informal supports is the result of his own entrepreneurial actions. He has, in fact, devised patterns of everyday occupation unique to his life circumstances, and food-related occupations are at the heart of his daily existence.

### *Social Forces and Occupational Deprivation*

After giving special attention to everyday occupations related to food, I want to broaden our thinking again back to everyday occupation more generally, expanding on situations in which severe occupational constraints are present. For example, in another part of the prison video, the men were asked to share what they “miss most” from their previous lives outside the prison. The emphasis on missing the everyday-ness of life is unmistakable and moving. Their words describing what they “miss most” offer compelling testimonies about the importance of everyday occupations to the quality of our lives—“making breakfast for my kids,” “going to the park,” “just looking at the sky,” “going to the store,” “taking a shower when I want to,” “making a phone call or writing a letter.” As one of the prisoners said, “The

simple things that didn’t matter to me out there *matter* to me now.”

*Beyond individuals to communities.* In situations such as prisons, where everyday occupation is severely constrained, the term *occupational deprivation* applies. Occupational deprivation is an outcome of societal conditions in which individuals are prevented from engaging in personally gratifying activities—conditions such as poverty, lack of employment opportunities, illiteracy, stigma, homelessness, disability, violence, or other social circumstances such as incarceration or institutionalization (Duncan, 2004; Wilcock, 1998). We have new and thought-provoking literature in our profession that examines the meaning of occupation and occupational deprivation in social situations such as these (Kronenberg, Algado, & Pollard, 2005; Watson & Swartz, 2004). The writers in these texts are challenging us as therapists as well as the occupational therapy profession more broadly to expand beyond the Western ideologies of individualism and independence; beyond the medical model; and beyond the traditional occupational categories of work, leisure, and self-maintenance. The aim is to reorient occupational therapy away from its overwhelming focus at only the individual level and toward the social forces that affect whole communities and populations, so that we may act as “catalysts for social transformation” (Hasselkus, 2004, p. xiv). The focus of these texts is on people’s rights, specifically the *right* of people everywhere to engage in meaningful occupation in their daily lives.

*The Occupational Enablement Group.* The recent text edited by Ruth Watson and Leslie Swartz (2004)—*Transformation Through Occupation*—presents the philosophy and practice of occupational therapy as viewed through the lens of South Africa. The chapters contain descriptions of occupational therapy-initiated programs and research in communities near Cape Town, such as program development for families living in poverty and violence, women and youth in the criminal justice system, youth at risk in the community, and families living with HIV/AIDS. The philosophical emphasis is on the socio-cultural infrastructure of the region and the need for structural changes, even as the aim is also for improved quality of life for individuals.

As just one example from the book, the Occupational Enablement Group is described—a program offered by occupational therapy students for men at a homeless shelter in the metropolitan area of Cape Town (Duncan, 2004). In setting the context for this project, the author of this chapter states,

Marginalized men abound in every major city in South Africa. You pass them waiting for casual jobs on the side of the road or begging at traffic lights . . . Most are semi-skilled and semi-literate; some are graduates and highly skilled . . .

Most have families they never see; some have squandered their wealth on gambling and drugs while others have been in prison or hospital so long they don't know how to live in society any more. Many are refugees or exiles from war-ravaged or politically volatile countries bordering South Africa. They all suffer from lost dignity, apathy, mental and emotional distress, and occupational alienation." (pp. 210–211)

As Duncan states further, homelessness is not simply lack of a home; homelessness is also lack of privacy, security, safety, and sense of belonging. Using Townsend's (2000) concept of enabling occupation, the students in this project strived to facilitate the ability of the men living at the shelters to "choose, organize, and perform" occupations they found useful and meaningful by rediscovering forgotten occupational interests and abilities, and by increased awareness of the capacity for renewal through occupation (Duncan, 2004, p. 210, 211).

Smith (1987), in her book on the everyday world as problematic, makes the strong point that the everyday world is not only the world as directly experienced by each of us, within which our consciousness begins. The everyday world is also constituted of unseen social and cultural forces. These unseen forces arise out of social systems and organizations that are not necessarily part of the local setting, yet they create changes and intrude on people's lives. Such are the economic forces that lead to poverty, the social forces that lead to violence, the environmental forces that lead to disease and ill health, and the political forces that lead to powerlessness and absence of autonomy.

*Invisible social forces in Western societies.* The South African text edited by Watson and Swartz (2004) and the global text edited by Kronenberg et al. (2005) offer potent testimony to the occupational needs of populations in developing countries around the world. Yet these social forces exist in all societies. Our literature is beginning to contain examples of inquiry that address these culturally and socially organized forces of influence on everyday occupation (homelessness, incarceration, community health, health service utilization, street kids, hospitalization, disability, unemployment) both at home and abroad (Benedict & Farel, 2003; Crepeau, 1994; Cutchin, 2000; Denshire, 1996; Farnworth, 2000; Finlayson, Baker, Rodman, & Herzberg, 2002; Henry & Lucca, 2002; McColl, 2005; Molineux & Whiteford, 1999; Snyder, Clark, Masunaka-Noriega, & Young, 1998; Suarez-Balcazar, 2005).

The UCLA Center on Everyday Lives of Families, referred to earlier, made my hometown newspaper one day in March 2005 with an article about their study of how working families in America manage the demands of their day-to-day lives (Verrengia, 2005). In the article, a linguis-

tic anthropologist with the center summarized findings from 32 Los Angeles working families by saying, "There isn't much room for the flow of life, those little moments when things happen spontaneously." In America, families are experiencing what these researchers call a "seismic shift" in response to both economic and sociocultural pressures of daily life. Four trends in family dynamics seem to be evolving in the increasingly scheduled lives of working families: growing indifference in the way people treat each other, less and less unstructured time, accumulation of clutter/stuff, and decreasing time together as an entire family. Who of us cannot see hints of these dynamics in our own lives, if not outright full-blown realities?

At times, these largely invisible social forces that severely constrain meaningful everyday occupation become visible to us in our therapeutic work with individuals, as can be found in the words of a young South African man with quadriplegia who described his day-to-day at-home existence as a "life sentence" (cited in Fourie, Galvaan, & Beeton, 2004, p. 78), or, in the United States, a caregiver for her husband with dementia who told me her life was "plain hell, in two words—it was just practically like being in a prison." Apparently, a sense of being imprisoned can be experienced locally, even in one's own home, as it can be experienced in a large maximum-security facility in Green Bay, Wisconsin.

The disruptions of everyday occupation imposed by illness or disability are the usual targets of our occupational therapy. But as the young man with quadriplegia and the caregiver for her husband with dementia clearly illustrate, the illness or disability is one thing, but larger forces contribute to their occupational deprivation. Both that which is experienced directly as well as that which exists at the level of an unseen social and institutional force in our lives are important to address. Both are part of our everyday world; both affect our personal and community lives; and both are important to our work in occupational therapy as we seek equity for people in their day-to-day occupations (Townsend & Whiteford, 2005).

## Letting Go

### *The Clothes We Wear*

In preparing this Slagle lecture, I had to let go of several types of everyday occupation that I originally wanted to include. I had looked forward to developing part of the lecture on everyday occupation related to *the clothes we wear*—the meaning of how we dress ourselves, concepts about fashion, the relationship of what we wear to concepts of impression management and the presentation of

self in everyday life (Goffman, 1959, 1963). I wanted us to think together about the relationship of our apparel to our identities and to our sense of well-being. What statements do people believe they are making to society by what they wear?

Being able to dress oneself independently and appropriately has great prominence as a therapeutic goal in a number of areas of practice. Do we include in our therapy sensitivities to the meaning of clothing to the person with whom we are working? Clothing is sort of a protective coating that we put on the body to protect it from the elements, but it is also a form of expression. What is expressed by the positioning splint that we are asking a client to wear, the orthopedic shoes, the prosthesis, or the bib in the dining room of the nursing home? Ann Neville-Jan—colleague in occupational therapy, scholar, and wearer of orthopedic shoes—has said that “discourse about shoes and clothing for people with disabilities is grounded in the medical model to the exclusion of contemporary fashion and style . . . While styles and designs of shoes have dramatically changed over time, the ‘orthopedic’ shoe has remained style-less and androgynous” (presentation at the 15th Annual Occupational Science Symposium, University of Southern California, Department of Occupational Science & Occupational Therapy, “Managing Appearance: The Oppression of Shoes,” Jan. 17, 2003). With our focus on independence and the need for adapted clothing to simplify the dressing process for clients, do we ignore the other important aspects of fashion and wearing apparel—thereby inadvertently contributing to what our colleague has referred to, using what I assume was purposely chosen strong language, as “oppression”?

### *Where We Put Things*

I had looked forward to developing a section of the lecture on *where we put things*—front room, back room, closet, shelf, pantry, top drawer, bottom drawer, attic, basement, kitchen. What does where we put things say about our occupational lives and our identities and our sense of well-being? Virginia Dickie (2003), in her study of the identity of home crafters as workers, found that those craft people who had a designated place to store supplies and to work on craft products seemed to have stronger identities as crafters and workers. The way they organized their space, including where they put things, made a statement about their sense of value of themselves as workers.

One of my graduate students did a qualitative study on the experience of older women who had recently been prescribed the use of a cane (Euhardy, 1998). One of the primary themes of meaning derived from the data was related to where the women *put* their canes: “The cane is hanging

on the bedroom door . . . That’s where I keep it. If I need it, I know where it is” (p. 34). Outside the home environment, where to put the cane was described as a significant problem for some of the women; situations in restaurants and churches were especially troublesome: “It’s an awful nuisance, you don’t know where to put it . . . it’s always in other people’s way . . . you just don’t know where to put it. Or what to do with it” (pp. 40–41).

I don’t think, in our literature on assistive devices, the problem of where to put the devices has been identified as a possible reason for lack of use—yet, such a reason may very well exist. In our published research, study participants give other reasons for non-use, such as the device is not needed, does not work well, is too cumbersome, or is too difficult to use (Gitlin, Levine, & Geiger, 1993; Mann et al., 2005). Problems with *where to put the thing* may very well be embedded in some of these statements.

When we ask a client to keep cooking utensils out on the counter for ease of use, or on the lowest shelf to be more reachable, or to install a grab bar on the side of the tub, to move a bed from the bedroom upstairs to the dining room downstairs, to get rid of the throw rugs, or to put a telephone on the bedside table, these seemingly reasonable suggestions—from our point of view—may or may not fit with the person’s own sense of where things belong and what should be present in what place. Like preparation of a meal, where we put things likely draws strongly on our family history, and memories of where our mother or father put things, and how things were stored in our growing-up years. I still think, to this day that I should keep a little dish of butterscotch candy in the dining room cupboard and that the second drawer down in my dresser should contain my underwear.

### *Travels in Daily Life*

I wanted to talk about our *travels in daily life* and expand on how those travels are related to our everyday occupation. The occupational purposes of adult daily travel, the nature of the travel itself, and the constraints on travel are all of interest (Primeau, 1996b).

But of equal interest is the travel of children in their everyday occupations—to and from school, of course, but also in their paths of travel in their neighborhood play. In Roger Hart’s creative study on Children’s Experience of Place, conducted in the mid-1970s, he mapped out the territories of the children in his research—the farthest distances of free range, the farthest distances of “with permission,” the farthest distances of “with permission and with other children.” He described their paths and shortcuts, where they went on foot or on bicycles; he described their scary places, secret places, magic places.

What would be the free range of children today in urban settings? What social forces have come to bear on the freedom of children to roam their neighborhoods or to walk to school? My sister and I walked eight blocks to our elementary school, a route that included a path through an orchard next to a woods and then crossed a main street as well as a number of side streets. There were no crossing guards and no traffic lights; we looked both ways and ran across when there was a break in the flow of traffic. If my parents worried about our safety, I was unaware of it. I remember no worries about safety on my part. The times were different, and some of the dark forces that seem to be present today were either ignored, extremely rare, unknown, or nonexistent in those years. What are the effects of this more fearsome world today on children's senses of adventure, self-confidence, independence, freedom, and play? What are the effects, in other words, on the developmental trajectory of a child in this day and age?

## Awakening to the Everyday

We can, each of us, only know the world as we experience it (Dietz, Prus, & Shaffir, 1994). I have presented a viewpoint in this lecture that, in order to understand people, "it is necessary to become intimately familiar with their life-worlds: to see how people make sense of the situations they encounter in their daily routines and how they deal with these situations on an ongoing basis" (Dietz et al., 1994, p. 2). Our everyday living is governed by certain unassailable givens such as our families of origin, birth cultures, our genetic physical and mental capabilities, and the institutional forces of our society, but our human selves can transform these nascent beginnings into lives that possess countless and prolific variations on our common humanity.

I believe that the ordinary rhythm of daily living is the deep primordial nourishment of our existence. It is the "truth"—the primary reality for each one of us. After all, everyday occupation is present in our lives at *all* times and in *all* places.

As Michel de Certeau (1998) has stated, the legitimacy of our everyday ways of operating and doing things will be achieved if these practices "no longer appear as merely the obscure background of social activity, and if a body of theoretical questions, methods, categories, and perspectives, by penetrating this obscurity, make it possible to articulate them" (p. xi). As occupational therapists—in this profession that we love—we have the potential to be an exception to the generalized *invisibility* of everyday occupation in people's lives. We can do this by awakening to its already existing presence in our philosophy, in our education, in our research, and in our therapeutic practices. *With our clients,*

such a heightened awareness will enable us to enter the rich and singular spaces of their everyday lives, maximizing our abilities to work together effectively toward the maintenance and renewal of meaningful day-to-day living. *With the public*, an awareness such as this will contribute toward broader and deeper insights into the importance and meaning of everyday occupation in the social fabric of our lives, thereby helping people find value in their everyday practices (Wadel, 1979).

May it be so. ▲

## Acknowledgments

I extend my heartfelt gratitude to Wendy Wood for nominating me for the Eleanor Clarke Slagle Lectureship Award; to quote Thomas Jefferson, "Friendship is precious, not only in the shade, but in the sunshine of life." Thank you, Wendy, for your friendship in this moment of sunshine. I also give special thanks to good friend and colleague Ruth Benedict for her very able (and patient) assistance with the technological aspects of the lecture.

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