

FACULTAD DE PSICOLOGÍA
UBA

IDIOMA INGLÉS

TERAPIA OCUPACIONAL

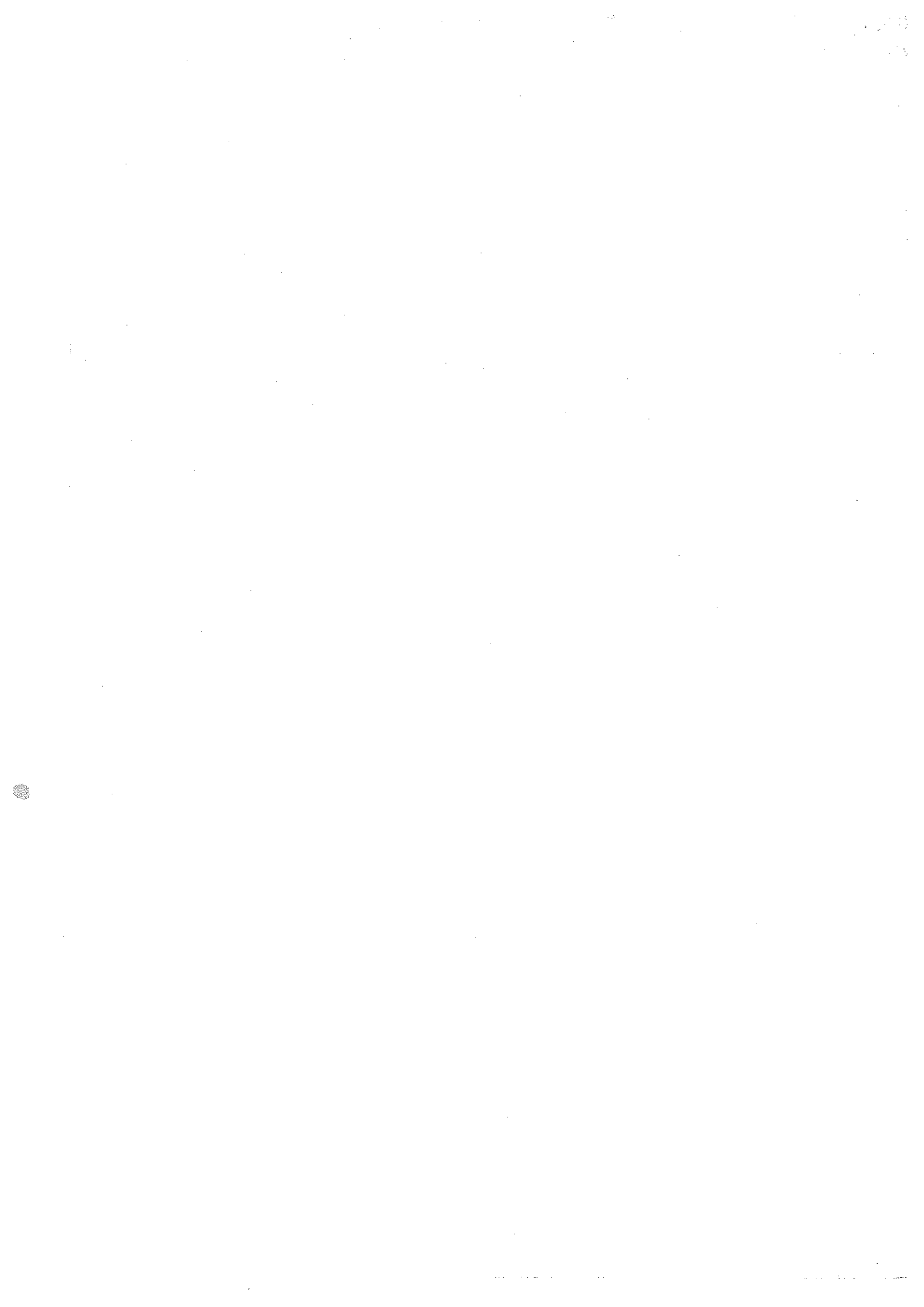
MÓDULO II

MATERIAL PARA EL ALUMNO

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Titular

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Este material está siendo procesado y evaluado internamente y ha sido diseñado únicamente para uso interno de la cátedra en el
AÑO 2009



GLOBAL READING

ACTIVITY 1 : This is a prediction task so you are not expected to provide accurate information from the article yet. However, you can predict or hypothesize some information considering:

The title Subtitles Key words Topic sentences

Model introduction

Analyze the introduction to this research article.

A) Skim the text and note how the authors organized this section of the text. The words in **bold** will help you.

Consider the following steps mentioned in the CARS model:

1. Making topic generalizations
2. Reviewing previous research
3. Indicating a gap

B) Explain in your own words the information presented in each of these steps.

British Journal of Occupational Therapy January 2003 66(1)

Home Adaptations: User Perspectives on the Role of Professionals

Clare Picking and Helen Pain

Introduction

5 People with disabilities have a legal right to access public funds and professional assistance when adapting an unsuitable home to meet their needs (Local Government and Housing Act 1989). The way assistance is provided varies across the country and, despite the many adaptations undertaken each year that prove effective for the recipient (Heywood 2001), people with disabilities do also express frustration about the systems that they are required to use in the process of acquiring an adaptation (Nocon and Pleace 1998).

10 **Several studies and reports have, in the past, highlighted** the existence of problems associated with providing housing adaptations. **Both Heywood (1994, 2001) and Age Concern (1998)**, in their national reports, commented on long waiting times for assessment and for the work to be carried out. They also uncovered difficulties with inadequate budgets and the operation of the Disabled Facilities Grant system. Nocon and Pleace (1998) and Adams (1996a, 1996b) described inequity of services according to housing tenure. Nocon and Pleace (1998) also described criticism by people

15 with disabilities of some professional staff for not involving them in decision making about the

adaptation and appearing to 'know best'. Adams (1996a) identified some poor joint working practices and the influence of local policies on provision.

20 People with disabilities were asked to contribute their views in the above studies, many of which concerned decision making before the adaptation began. **However**, inquiry concerning feelings about the process of adaptations was not particularly developed. Heywood (1994) outlined examples of good practice and what constituted a satisfactory service and later, in examining outcomes rather than processes, emphasised the importance of the role of information in the provision of an adaptation and the need for accurate specifications by the occupational therapist beforehand (Heywood 2001).

25 **There is little guidance for occupational therapists** that explains either the role of professional support in home adaptations or those aspects of the process that could be controlled by the disabled person. Dudman (1995) described the adaptation process for occupational therapists working in community care, from assessment to completion of the work, but made no comment about how the therapist should interact with the person during the process. Bull (1998) explored
30 how to make the most of occupational therapists' skills, dwelling mainly on assessment and specifications. Bradford (1998) referred to the need for a contract administrator for major adaptations, in whose absence occupational therapists often found themselves carrying out duties of coordination.

35 **A study was conducted, which forms the basis of this article**, to ask whether people with disabilities believed that they had received appropriate professional support, information and practical help when adapting their homes and to learn more about their feelings regarding the adaptation process. The study covered the roles of the main professionals involved in these adaptations, such as surveyors and grant officers, but this article focuses on the role of local
40 authority occupational therapists who are central to the process of most publicly funded adaptations.

DETAILED READING

1 Answer these questions

- a) List three problems associated with providing housing adaptation.
- b) What is the aim of the study carried out by the authors?

2 Indicate the logical relationships indicated the following words and mention the ideas they connect:

despite (line 5)

However (line 19)

but (line 28)

but (line 38)

3 Indicate the referents to these words

Their (line 4)

They (line 7)

They (line 12)

Themselves (line 32)

Who (line 39)

POST READING

Write a summary paragraph with the main ideas in the text. Use the answers to the previous activities to help you.

LINGUISTIC ELEMENTS

VOCABULARY

A) Prefixes to form opposites: Find words in the text related to the words given in the first column. How do the prefixes change the meaning of the word?

	Word in the text
abilities	disabilities
Suitable	
Covered	
Adequate	
equity	

B) Topical lexis

List words related to the main area in the text

TEXT GRAMMAR

SELF-STUDY SECTION: *El lenguaje de las introducciones en los artículos de investigación*

Las introducciones en un artículo de investigación presentan un lenguaje característico que las identifica como tales. Este lenguaje funciona como señales dentro del texto que guían al lector sobre la información que se está desarrollando. El lenguaje en las introducciones está ligado a la etapa de la introducción.

Por ejemplo, para presentar la importancia del tema el autor puede recurrir a exponentes lingüísticos o señales como:

UNIT 1 TEXT 3

GLOBAL READING

ACTIVITY A: Read the following summary of the sections in a research article and indicate which section of the article they come from. Choose from:

Conclusions
Methods

Results
Background

Aims
Key words

What helped you to match the headings to the sections?

ACTIVITY B: Read the title, underline key words in the text (apart from the ones provided by the authors), and notice the different parts of the research article. With this information predict the content of the text.

What do you think the article is about?

- 5 Occupational Medicine Advance Access originally published online on March 7, 2006
Occupational Medicine 2006 56(4):237-242; doi:10.1093/occmed/kql003
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10 **The implementation of occupational health guidelines
principles for reducing sickness absence due to
musculoskeletal disorders**

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20

25 _____ Occupational health guidelines recommend a biopsychosocial approach to manage sickness absence due to musculoskeletal disorders (MSDs), with a primary focus on early intervention through provision of a supportive network.

_____ To investigate the implementation of a guidelines-based intervention (early contact of absentees; addressing psychosocial obstacles; offering temporary modified work; communicating among the players), and to determine whether this is effective for reducing return-to-work times and duration of future absence.

30 _____ A non-randomized controlled trial was conducted within a UK company. Occupational health nurses at two experimental sites (1435 workers) were trained to deliver the intervention to workers taking absence due to MSDs (low back and upper limb disorders), while usual care was delivered at three control sites (1483 workers). Company-recorded absence data were collected over a 12-month follow-up period.

35 _____ The implementation of the experimental intervention was impeded by unforeseen organizational obstacles at one site (policies, procedures and individual approaches) which had a detrimental effect on uptake and delivery. At the site where the intervention was delivered per protocol, absence was significantly less compared with controls; 6.5 and 10.8 days, respectively. However, the duration of future absence was not
40 significantly different (13.0 and 25.1 days, respectively).

_____ An early intervention addressing psychosocial obstacles to recovery can be effective for reducing absence due to MSDs. Successful implementation, where the key players are onside and organizational obstacles are overcome, is difficult to achieve.

45 _____ Musculoskeletal disorders; occupational health guidelines; psychosocial intervention; sickness absence

POST READING ACTIVITY

Paraphrase, in Spanish, each section of the article.

LINGUISTIC ELEMENTS

VOCABULARY

A) Topical lexis

1) List the words or phrases related to the topic of the text.

2) List academic vocabulary. For example: *approach*

TEXT GRAMMAR

A) Find examples of the passive voice. Why is it used in this text?

Example:

A non-randomized controlled trial **was conducted** within a UK company.

ASSIGNMENT FOR NEXT CLASS

Read the complete introduction to the sections you read above (text: *The implementation of occupational health guidelines principles for reducing sickness absence due to musculoskeletal disorders*) and do these activities:

A) Scan for key words or phrases and make a more specific prediction.

B) Study the structure this Introduction and highlight linguistic exponents the authors use to:

- a) review previous research
- b) indicate a gap
- c) indicate the aim of the article

C) Explain in your own words the information presented in each part of the introduction (see question B)

D) Answer these questions

1. What are the obstacles of recovery mentioned here?
2. Explain the two groups of psychosocial obstacles?

E) VOCABULARY

List topic-related vocabulary

Introduction

- 5 Musculoskeletal disorders (MSDs) are one of the most commonly reported work-related illnesses [1]. Although the majority of people experiencing MSDs either remain at work or return-to-work (RTW) in <4 weeks [2], recurrence rates can be up to 85% over a lifetime [3], and a small proportion of people seem not to recover and have difficulty in returning to work [4]. It has been suggested that, rather than relying on traditional medical concepts of

10 prevention and cure, the focus should be on obstacles to recovery [5]. These obstacles fall into three basic categories: biomedical, ergonomic and psychosocial [6], though the accumulating evidence indicates that the first two categories exert a modest influence compared with the third [7].

15 Psychosocial obstacles usefully can be separated into two groups. There are the clinically focused 'yellow flags' [8] concerning beliefs about the nature of pain and its clinical course, which are essentially psychological parameters such as distress, depression, poor coping strategies and mistaken or unhelpful beliefs. Yellow flags can alert the clinician to a risk of chronicity, being present in workers and non-workers alike [9]. In addition, workers may have specific concerns about work and work perceptions, which also may become obstacles to recovery. Occupational psychosocial obstacles, such as job dissatisfaction, stress, lack of perceived social support, job inflexibility and low perceived control have been termed 'blue flags' [10,11].

25 There is now general agreement among the various occupational health guidelines for management of MSDs: a need for diagnostic triage, identification of potential psychosocial obstacles to recovery, provision of advice that MSDs are self-limiting conditions and, importantly, that remaining at work or an early RTW (if necessary with temporary modified duties) should be encouraged and supported [12]. These principles suggest that joint employer-worker initiatives combined with support from health professionals are needed to provide optimum support so as to facilitate workers remaining at work or returning to work as early as possible.

35 To date, the sort of multidimensional approach advocated by the guidelines has not been implemented and tested in the occupational health environment. The objective of the present study was to compare the efficacy of an early, psychosocial intervention with traditional management for reducing sickness absence in workers with MSDs. It was hypothesized that the experimental intervention would be superior to management as usual for reducing absence due to MSDs.

UNIT 2 TEXT 1

Section of the research article: METHOD

Global reading

You are going to read the “method” section of the article *The implementation of occupational health guidelines principles for reducing sickness absence due to musculoskeletal disorders*.

1. What information do you expect to find in this section?
2. What text organization pattern does this section have? / How is this section organized?
3. Work out the lexical chains that develop the ideas.
4. Now you are going to read the “method” section. Skim through the text and note how this section is organized.
What information do the authors include here?

► **Methods**

Five manufacturing sites of a large pharmaceutical company in the United Kingdom participated in a non-randomized controlled trial of the intervention. **They** were selected from the 14 available sites because (i) they offered homogeneity of job type (mostly manual workers) and had similar absence rates due to MSDs (~12%) and (ii) the absence notification and recording was accurate and immediate compared with non-manufacturing sites. For logistical reasons, two sites in close geographical proximity were selected as the experimental sites (1435 workers), and the other three sites (which were spread nationwide) acted as control sites (1483 workers). There were no systematic differences between the experimental and control sites in terms of age and gender of workers.

At the experimental sites, the protocol required occupational health nurses (OHNs) to identify and contact workers at the start of absence, and invite **them** to come into the occupational health department to discuss their condition and give their informed consent to be part of the study. At the control sites, management as usual continued; in general, this meant that workers absent due to MSDs would be seen by the OHN only on RTW, or were contacted after being absent for a considerable period of time, meaning there were no attempts at an early RTW.

Using pre-defined criteria, OHNs at the experimental sites assessed each participant for study eligibility. Eligible participants were those with MSDs (back/neck pain with/without referred limb symptoms; shoulder/elbow/wrist/hand symptoms). Participants were also assessed for the presence of clinical ‘red flags’; if there was any suggestion of serious underlying pathology, the worker would be excluded from the trial and immediately referred to the company doctor.

- 25 The intervention comprised several components that the OHNs were trained to deliver using a case-management approach over a period of 4 weeks. The OHNs received a training package that included education about pain and pain mechanisms, tackling negative beliefs and attitudes, and reinforcing evidence-based messages and advice (e.g. importance of keeping active and early RTW), and they were provided with a manual and checklists to
- 30 facilitate delivery of the protocol.

DETAILED READING

A) Complete this table with information from the text

Place(s) of the study	
Reason for choosing these sites	
Characteristics of eligible participants,	
Material provided to nurses (OHNs)	

REFERENCE: Indicate the referents to these words

They (line 4)

Them (line 13)

They (line 29)

POST READING ACTIVITY

Write a summary paragraph with the main ideas in the text. Use the answers to the previous activities to help you.

LINGUISTIC ELEMENTS

VOCABULARY

A) Suffixes to form nouns. Find nouns in the text related to the words given in the first column.

	Word in the text
Homogenous	
Notify	
Differ	
Absent	
Manage	
Suggest	
Intervene	
deliver	

B) Find words typical of the “method” section. For example: *experiment, participants.*

TEXT GRAMMAR

A) The past passive voice is common in the “method” section of research articles. For example:

“... two sites in close geographical proximity were selected as the experimental sites
..”

Why is it used?

Find more examples in the text. Find a Spanish equivalent for the past participles.

B) The simple past tense is common in this section. Why?

Find examples of verbs in the past simple tense and make sure you know their meaning.

UNIT 3

Section of the research article: Results

Self-study section: Como su nombre lo indica, la sección “Resultados” de un artículo de investigación presenta los resultados obtenidos en una investigación a partir de la aplicación de algún método. El método permite evaluar las hipótesis del investigador sobre determinado tema, y luego obtener resultados y conclusiones.

Los exponentes lingüísticos característicos de esta sección son:

- **Uso del tiempo pasado o presente**

These findings **indicate** that message boards ... grew dramatically between 1998 and 2000.

Examination of these same message boards ... **reveals**

The majority of message boards **had** a mean stated age of 18 years; 80% of members **described** themselves as being between the ages of 14 and 16 years old.

- **Uso del tiempo presente cuando se hace referencia a tablas o gráficos que acompañan el texto de esta sección**

Table 3 **shows** ...

- **Selección léxica para esta sección**

Show	reveal	indicate	as shown in Table 2	average
Mean	percentage	describe	range(d)	

Otra característica de esta sección es la inclusión de cuadros o tablas para esquematizar los resultados. A los lectores de inglés como lengua extranjera, estos cuadros o tablas son de suma utilidad ya que nos permiten comprender los resultados de forma más directa, y por lo tanto evitar leer en detalle el texto de esta sección.

Unit 3 Text 1

Part 1: abstract

GLOBAL READING

1. Read the title and the key words.
2. Where and when was this article published?
3. Predict the content of the research article?
4. Skim the abstract and complete this table:

Aim of the study	
Number of people in the study	
Purpose of the analysis of the participants' narratives	
Metaphors used by the participants	

Occupation and meaning in the lives of women with chronic pain

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Publication Frequency: 4 issues per year

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Abstract

The aim of this study was to examine how women experience occupations as they live with chronic pain and more specifically to gain detailed knowledge regarding the meaning of important occupations in their life. The article is based on an analysis of 17 narratives based on an Occupational Performance History Interview. Participants were interviewed as part of their occupational therapy assessment at Orton Rehabilitation. The narratives were analysed in order to identify the experiences of doing occupations in everyday life. When interpreting their problems in and solution for doing occupations women in this study used four basic metaphors: (1) moving forward, (2) slowing down, (3) fighting and (4) standing still. The tone of the narratives varied from hopeful to hopeless and from fearful to frustrated. Each of these four types of narratives differed in: (a) the tone of the narrative, (b) the meaning ascribed to occupation, (c) how others are viewed in relation to one's doing, and (d) how the future is envisioned. The experience of occupation in the lives of women with chronic pain is heterogeneous and depends on the underlying meaning of the narrative used to experience and interpret occupational life.

Keywords: Metaphor; narrative; participation; performance

PART 2: Methodology and Findings

Methodology

Participants

This research was approved by the ethical board of Orton research unit in Helsinki, Finland. Potential participants were recruited from a pain rehabilitation programme. Criteria for inclusion were that potential participants were judged by an occupational therapist to be capable of an in-depth discussion of their life stories. Initially 19 women consented to be participants in this study. However, two of the women gave inadequate responses in their interviews and, thus, they were dropped from the study, resulting in 17 participants. Their demographics are shown in [Table I](#).

Table I. Participants: age, diagnosis and type of interpretation.

Name (n 17)	Age (y)	Diagnosis	Type of interpretation
Jaana	33	Reflexive sympathetic dystrophy of the upper extremity	Standing still
Sari	33	Operated herniated disc	Moving forward
Miina	33	Fibromyalgia	Fighting
Seija	34	Thoracic outlet syndrome	Slowing down
Pirjo	35	Fibromyalgia	Moving forward
Marjaana	37	Peripheral nerve inflammation	Slowing down
Erja	42	Cancer	Moving forward
Leila	44	Thoracic outlet syndrome	Fighting
Leena	45	Neuralgia and allodynia in the lower	Moving forward

Table I. Participants: age, diagnosis and type of interpretation.

Name (n 17)	Age (y)	Diagnosis	Type of interpretation
		extremities	
Elina	46	Lumbar spondylolisthesis	Standing still
Tuulikki	47	Fibromyalgia	Slowing down
Anja	48	Headache	Standing still
Tuula	49	Herniated lumbar disk and desis of vertebrae	Standing still
Kaisa	50	Reflex sympathetic dystrophy of the upper extremity	Slowing down
Marjatta	52	Herniated lumbar disc	Moving forward
Mirjami	53	Fibromyalgia	Standing still
Marja-Liisa	55	Herniated lumbar disc	Slowing down

Findings

A typology of four distinctive types of narratives was identified. They were organized around dominant metaphors of moving forward, slowing down, fighting, and standing still. As illustrated in [Table II](#), the features that distinguish the four types of narratives from one another are: (a) the tone of the narrative, (b) the meaning ascribed to occupation, (c) how others are viewed in relation to one's doing, and (d) how the future is envisioned. Findings are given in [Table II](#). Each of these differences is briefly noted below and then the following sections describe each type of narrative in detail.

Table II. Interpretive repertoires and main results of the data analysis.

Interpretation type Results	Moving forward	Slowing down	Fighting	Standing still
Tone of narrative	Hopeful	Ambivalent and frustrated	Fearful	Unsatisfied and hopeless
Meaning ascribed to doing	Occupation is a source of enjoyment and a challenge to be solved	Doing requires slowing down and enjoying little accomplishments	Doing has to be managed to meet obligations without expecting satisfaction or enjoyment	Satisfying doing is impossible until certain conditions are met
View of others in relation to one's doing	Others needs to understand and support	Slowing down affects others negatively	One should do without help and with the pain hidden from others	It is impossible to manage without help from others
View of the future	New ways to participate	Uncertain; focus is on the here and now	Its difficult to imagine the	It is impossible to plan for the

Table II. Interpretive repertoires and main results of the data analysis.

Interpretation type	Moving forward	Slowing down	Fighting	* Standing still
Results	have been found or envisioned		future	future unless conditions are first met

The tone of each of the four types of narratives was distinctive. Narratives of moving forward have a hopeful tone, while those of slowing down are frustrated. Narratives of fighting are fearful in tone whereas narratives of standing still are dissatisfied and hopeless.

Similarly, the meaning ascribed to occupation and the corresponding way of managing occupation is distinct in each type of narrative. Occupation is a challenge for women who experience that they are moving forward. Occupation is a source of pleasure and satisfaction for those who slow down their pace to focus on the here and now accomplishment of activity. Women whose solution is to stand still see it as necessary to suspend their doing until certain conditions are met; they experience a loss of meaningful occupation. These who are fighting experience a trade-off of pleasurable or satisfying occupation for being able to take care of those occupations they see as duties.

The women also see themselves and their occupational lives quite differently depending on their narrative. Women who are moving forward feel they need others to understand and support them. Women who have slowed down feel they have disappointed and disadvantaged others in their lives. Women who are fighting feel they must avoid seeking help or letting others know about their pain. Women who experience standing still are dependent on others and sometimes blame them for their circumstances.

The future is different for each type of narrative. Women with narratives of moving forward envision possibilities in the future. Women with narratives of slowing down focus on the here and now and, thus, the future is uncertain. Women with narratives of fighting find it impossible to imagine the future. Women with narratives of standing still see the future as dependent on certain conditions being met.

DETAILED READING

Activity 1

1 Give the Spanish equivalent of the diagnosis in Table I (of the text, Methodology section)

2 Read the table in the **FINDING** section and

- a) Explain what the metaphors mean according to the variables indicated in the first column of the table.

Activity 2: Find examples of linguistic exponents in this section (Findings): vocabulary and verbs (indicate the tense).

UNIT 4 TEXT 1

Section of the research article: Discussion

Self-study section: Del mismo modo que la sección “Introducción” del artículo de investigación sigue una serie de pasos que la estructuran, la sección Discusión también contiene pasos que los autores siguen para organizarla. El conocer la estructura y los pasos o *moves* nos ayudará como lectores a localizar la información más fácilmente. A continuación se detallan los pasos más comunes en la sección “Discusión”

1. **Recapitulación de la información:** el autor recurre a este paso cuando desea reforzar su discusión repitiendo los puntos principales, resaltando información teórica, o recordando al lector sobre información más técnica.
2. **Presentación de los resultados:** Si bien los resultados fueron presentados en la sección “Resultados”, en la discusión el autor generalmente los repite (más brevemente)
3. **Resultados (in)esperados:** El autor comenta si el resultado es el esperado o no.
4. **Referencia a investigaciones previas:** referencias para comparar o contrastar la investigación, o para reforzar la investigación realizada.
5. **Explicación:** Este paso se incluye por lo general cuando el resultado es inesperado, y por lo tanto requiere una explicación.
6. **Ejemplificación:** Los ejemplos acompañan la explicación.
7. **Deducción e hipótesis:** El objetivo de este paso es hacer una generalización de los resultados.
8. **Recomendaciones:** El autor presenta la necesidad de profundizar la investigación, y sugiere líneas de trabajo para investigaciones futuras.

GLOBAL READING

A) Scan the text and find:

Cognates

key words / lexical chains.

B) Read the first sentence of each paragraph. How is this section organized?
(Remember this is a prediction stage)

C) Considering the organization predicted in question B and indicate which of these steps are included in the Discussion section below:

1. the paragraphs discussing Outcomes/ results
2. the paragraph(s) discussing Unexpected results
3. the paragraph(s) presenting generalization of the results
4. the paragraph(s) mentioning the need for further research and recommendations

Discussion

This study revealed four distinct patterns of how doing is interpreted in the narratives of women living with pain. Importantly, the interpretations in these narratives were not related to the nature of their pain (see Table I). Similarly, there was no evidence of a relationship of the patterns to either severity or duration of pain, indicating that the narrative was the mediator and not the consequence of how pain was experienced. **Although** all participants have chronic pain, their occupational performance and participation and how they experience this doing differ dramatically across the four types of narratives. Each narrative metaphor results in a very different approach to living with pain.

Each of the four narratives serves as a kind of paradigm for managing life with chronic pain. As such, they illustrate sometimes subtle, yet important details about living with pain that have not been fully disclosed by previous research. For example, Thomas 4 and Cagle 5 reported how chronic pain resulted in changes in the experience of time, an unknown future, and separation from others. The present study suggests that there are subtle differences in these dimensions between groups of persons with chronic pain according to their narratives. **While** all the subjects had altered temporal experiences, each group dealt with time in very different ways. Some slowed down, some continued to focus on the future, some put their lives on hold. These differences were very important for how these women experienced and organized their lives. **While** all the participants were affected in some way by the reactions of others they differed substantially. Those who moved on minimized concerns about others or involved them in their adaptations and plans for the future. Those who slowed down felt worried about the impact of their changed performance on others. Those who fought tried to hide their pain from others and those who put their lives on hold blamed or wanted to be rescued by others. These and other differences across the four types of narratives illustrate that how women manage occupational life in the face of chronic pain is not homogeneous.

Several other features of the narratives should be underscored. First, for each of these women, their narrative is a solution they trust. A common feature of the narratives was that the way of interpreting their life situation was experienced by these women as the only way they could see things. These women did not entertain the idea that there were other ways to approach their situation. They were unaware that their own was only one of at least four possible interpretations or solutions to the situation of living with chronic pain.

Second, as noted by Barrett et al. 20, saying and doing are interchangeable in these narratives. Women with metaphors of moving forward are constantly looking to find ways to incorporate important occupations in their lives. Women who see themselves as having slowed down curtail their performance and seek satisfaction in small accomplishments. Women with a metaphor of fighting do those things they consider to be part of their duty to the detriment of other occupations. Those who use the metaphor of standing still have mostly put their occupations on hold.

Third, continuing to perform is, by itself, not a sufficient condition for being satisfied with one's life. For instance, the women who saw themselves as fighting or standing still may still be involved in doing some things but, because of the meaning assigned to that performance, they were intensively unsatisfied. The narrative interpretation of one's

doing is an important dimension of crafting occupational life as argued by Kielhofner et al. 41. **This finding** also underscores that the meaning of occupation is not always positive. For the fighting group occupation was a kind of necessary suffering and for the standing still group occupation was something of which they had been robbed.

Fourth, this finding suggests that there are two possible ways for people with chronic impairments to achieve a satisfying occupational life. Previously, Jonsson et al. 14 identified that persons who had positive narratives had engaging occupations characterized by regular involvement over time in a coherent and meaningful set of occupational forms that involved a community of others who shared common interests and commitment. The women who were moving forward all had narratives characterized by engaging occupations. **However**, the women who had slowed down adapted their occupational lives in a different way. **They** literally snatched opportunities to do things when it was possible and they took satisfaction in what they could do. While the women in this group did appear frustrated, they nonetheless identified an especially engaging occupation, spoke of its history and affect, plus were able to replace this favourite occupation with one that gave them similar satisfaction. The way these women talk about an occupation that helps them to survive the life with pain parallels the finding of Jonsson et al. 14 concerning what makes retirement a positive experience. This kind of occupation is described as an enjoyment, a challenge, demanding intensive doing or the possibility to be a member in a social group that shares the same interest. Notably, both these groups of women also acknowledged that they were willing to accept some level of pain as a consequence of their engaging in occupation. Similarly this study showed that positive adaptation in occupation can involve bearing negative consequences of engaging in occupations in order to experience the positive aspects of such engagement. Finding the right balance between experiencing positive and negative consequences is a challenge for these women, but they have found ways to do so.

DETAILED READING

- 1) Explain, in your own words, the information presented in each step (question C, global reading)
- 2) What is the function of the enumerators? Explain, in your own words, what information each enumerator presents.
- 3) What ideas do these connectors link?

Although (paragraph 1)
While (paragraph 2)
While (paragraph 2)
However (last paragraph)

- B) What do these words refer to?

These findings (paragraph 5)
They (last paragraph)

FURTHER PRACTICE

Apply the reading strategies to this text (it is the last section of the text: **Occupation and meaning in the lives of women with chronic pain**)

Clinical implications of the findings

The consequences that occupational narratives have for the women in this study challenge occupational therapists to pay more attention to how clients talk about the meaning of occupation in their lives. More specifically, the study underscores the value of completing a narrative interview such as the OPHI-II. A recent study by Apte et al. [32](#) also emphasized from the perspective of both clients and therapists how important the OPHI-II is for generating insight for both the client and therapist into the client's life situation. Narrative information can substantially increase our ability to appreciate our client's choices for engaging in an occupation.

When a client's narrative supports a satisfactory occupational life, it is easy to envision occupational therapy as validating and helping the person continue the narrative. Much more challenging is the situation wherein a person's narrative has led to an unsatisfactory occupational life. While the obvious course would be to support individuals to change their narratives, what is not so clear is whether and how this can be done.

While it was not a primary purpose of this study to address change in narrative, the data did indicate variability in narrative change. Some women appeared to be using a narrative approach to life that predated their illness and they seemed quite fixed in their pattern. One participant in the moving forward group mentioned that there had been a time when she had tried to manage through fighting. However, there was no other evidence in the study to suggest that the four narratives are sequential stages in occupational adaptation. Rather, as noted above, the women appeared to view their narrative as the only way they could view their lives. The different narratives showed different styles of interpreting and engaging in occupations when living with pain.

Along this vein, Goldstein et al. [42](#) examined the narratives of men with AIDS over time and they concluded that the narratives were resilient even when their consequences were negative. Jonsson et al. [14](#), in a longitudinal study of retirement, suggested that narratives can change over time. A number of factors including a surprising turn of events, others' intervention, and personal actions accounted for those changes. The questions of whether and how narratives can be altered in the therapeutic context is an open one that would certainly bear examination in future research.

