Occupational Therapists

(O*NET 29-1122.00)

Significant Points

- Employment is expected to grow much faster than average and job opportunities should be good, especially for therapists treating the elderly.
- Occupational therapists must be licensed, requiring a master's degree in occupational therapy, 6 months of supervised fieldwork, and passing scores on national and State examinations.
- Occupational therapists are increasingly taking on supervisory roles, allowing assistants and aides to work more closely with clients under the guidance of a therapist.
- More than a quarter of occupational therapists work part time.

Nature of the Work

Occupational therapists help patients improve their ability to perform tasks in living and working environments. They work with individuals who suffer from a mentally, physically, developmentally, or emotionally disabling condition. Occupational therapists use treatments to develop, recover, or maintain the daily living and work skills of their patients. The therapist helps clients not only to improve their basic motor functions and reasoning abilities, but also to compensate for permanent loss of function. The goal is to help clients have independent, productive, and satisfying lives.

Occupational therapists help clients to perform all types of activities, from using a computer to caring for daily needs such as dressing, cooking, and eating. Physical exercises may be used to increase strength and dexterity, while other activities may be chosen to improve visual acuity or the ability to discern patterns. For example, a client with short-term memory loss might be encouraged to make lists to aid recall, and a person with coordination problems might be assigned exercises to improve hand-eye coordination. Occupational therapists also use computer programs to help clients improve decision-making, abstract-reasoning, problem-solving, and perceptual skills, as well as memory, sequencing, and coordination—all of which are important for independent living.

Patients with permanent disabilities, such as spinal cord injuries, cerebral palsy, or muscular dystrophy, often need special instruction to master certain daily tasks. For these individuals, therapists demonstrate the use of adaptive equipment, including wheelchairs, orthoses, eating aids, and dressing aids. They also design or build special equipment needed at home or at work, including computer-aided adaptive equipment. They teach clients how to use the equipment to improve communication and control various situations in their environment.

Some occupational therapists treat individuals whose ability to function in a work environment has been impaired. These practitioners might arrange employment, evaluate the work space, plan work activities, and assess the client's progress. Therapists also may collaborate with the client and the em-

ployer to modify the work environment so that the client can successfully complete the work.

Assessing and recording a client's activities and progress is an important part of an occupational therapist's job. Accurate records are essential for evaluating clients, for billing, and for reporting to physicians and other health care providers.

Occupational therapists may work exclusively with individuals in a particular age group or with a particular disability. In schools, for example, they evaluate children's capabilities, recommend and provide therapy, modify classroom equipment, and help children participate in school activities. A therapist may work with children individually, lead small groups in the classroom, consult with a teacher, or serve on an administrative committee. Some therapists provide early intervention therapy to infants and toddlers who have, or are at risk of having, developmental delays. Therapies may include facilitating the use of the hands and promoting skills for listening, following directions, social play, dressing, or grooming.

Other occupational therapists work with elderly patients. These therapists help the elderly lead more productive, active, and independent lives through a variety of methods. Therapists with specialized training in driver rehabilitation assess an individual's ability to drive using both clinical and on-the-road tests. The evaluations allow the therapist to make recommendations for adaptive equipment, training to prolong driving independence, and alternative transportation options. Occupational therapists also work with clients to assess their homes for hazards and to identify environmental factors that contribute to falls.

Occupational therapists in mental health settings treat individuals who are mentally ill, developmentally challenged, or emotionally disturbed. To treat these problems, therapists choose activities that help people learn to engage in and cope with daily life. Activities might include time management skills, budgeting, shopping, homemaking, and the use of public transportation. Occupational therapists also work with individ-



Occupational therapists help people improve their ability to perform tasks in their daily living and working environments.

uals who are dealing with alcoholism, drug abuse, depression, eating disorders, or stress-related disorders.

Work environment. In large rehabilitation centers, therapists may work in spacious rooms equipped with machines, tools, and other devices generating noise. The work can be tiring because therapists are on their feet much of the time. Those providing home health care services may spend time driving from appointment to appointment. Therapists also face hazards such as back strain from lifting and moving clients and equipment.

Occupational therapists in hospitals and other health care and community settings usually work a 40-hour week. Those in schools may participate in meetings and other activities during and after the school day. In 2006, more than a quarter of occupational therapists worked part time.

Training, Other Qualifications, and Advancement

Occupational therapists must be licensed, requiring a master's degree in occupational therapy, 6 months of supervised fieldwork, and passing scores on national and State examinations.

Education and training. A master's degree or higher in occupational therapy is the minimum requirement for entry into the field. In 2007, 124 master's degree programs offered entry-level education, 66 programs offered a combined bachelor's and master's degree, and 5 offered an entry-level doctoral degree. Most schools have full-time programs, although a growing number are offering weekend or part-time programs as well. Coursework in occupational therapy programs include the physical, biological, and behavioral sciences as well as the application of occupational therapy theory and skills. Programs also require the completion of 6 months of supervised fieldwork.

People considering this profession should take high school courses in biology, chemistry, physics, health, art, and the social sciences. College admissions offices also look favorably on paid or volunteer experience in the health care field. Relevant undergraduate majors include biology, psychology, sociology, anthropology, liberal arts, and anatomy.

Licensure. All States, Puerto Rico, Guam, and the District of Columbia regulate the practice of occupational therapy. To obtain a license, applicants must graduate from an accredited educational program and pass a national certification examination. Those who pass the exam are awarded the title "Occupational Therapist Registered (OTR)." Some States have additional requirements for therapists who work in schools or early intervention programs. These requirements may include education-related classes, an education practice certificate, or early intervention certification.

Other qualifications. Occupational therapists need patience and strong interpersonal skills to inspire trust and respect in their clients. Patience is necessary because many clients may

not show rapid improvement. Ingenuity and imagination in adapting activities to individual needs are assets. Those working in home health care services also must be able to adapt to a variety of settings.

Advancement. Occupational therapists are expected to continue their professional development by participating in continuing education courses and workshops. In fact, a number of States require continuing education as a condition of maintaining licensure.

Therapists are increasingly taking on supervisory roles. Because of rising health care costs, third-party payers are beginning to encourage occupational therapist assistants and aides to take more hands-on responsibility for clients. Occupational therapists can choose to advance their careers by taking on administrative duties and supervising assistants and aides.

Occupational therapists also can advance by specializing in a clinical area and gaining expertise in treating a certain type of patient or ailment. Therapists have specialized in gerontology, mental health, pediatrics, and physical rehabilitation. In addition, some occupational therapists choose to teach classes in accredited occupational therapy educational programs.

Employment

Occupational therapists held about 99,000 jobs in 2006. About 1 in 10 occupational therapists held more than one job. The largest number of jobs was in hospitals. Other major employers were offices of other health practitioners (including offices of occupational therapists), public and private educational services, and nursing care facilities. Some occupational therapists were employed by home health care services, outpatient care centers, offices of physicians, individual and family services, community care facilities for the elderly, and government agencies.

A small number of occupational therapists were self-employed in private practice. These practitioners treated clients referred by other health professionals. They also provided contract or consulting services to nursing care facilities, schools, adult day care programs, and home health care agencies.

Job Outlook

Employment of occupational therapists is expected to grow much faster than the average for all occupations. Job opportunities should be good, especially for occupational therapists treating the elderly.

Employment change. Employment of occupational therapists is expected to increase 23 percent between 2006 and 2016, much faster than the average for all occupations. The increasing elderly population will drive growth in the demand for occupational therapy services. In the short run, the impact of proposed Federal legislation imposing limits on reimbursement for therapy services may adversely affect the job market

Projections data from the National Employment Matrix

3					
Occupational Title	SOC Code	Employment, 2006	Projected employment,	Change, 2006-2016	
			2016	Number	Percent
Occupational therapists	29-1122	99,000	122,000	23,000	23

for occupational therapists. However, over the long run, the demand for occupational therapists should continue to rise as a result of the increasing number of individuals with disabilities or limited function who require therapy services. The babyboom generation's movement into middle age, a period when the incidence of heart attack and stroke increases, will spur demand for therapeutic services. Growth in the population 75 years and older—an age group that suffers from high incidences of disabling conditions—also will increase demand for therapeutic services. In addition, medical advances now enable more patients with critical problems to survive—patients who ultimately may need extensive therapy.

Hospitals will continue to employ a large number of occupational therapists to provide therapy services to acutely ill inpatients. Hospitals also will need occupational therapists to staff their outpatient rehabilitation programs.

Employment growth in schools will result from the expansion of the school-age population, the extension of services for disabled students, and an increasing prevalence of sensory disorders in children. Therapists will be needed to help children with disabilities prepare to enter special education programs.

Job prospects. Job opportunities should be good for licensed occupational therapists in all settings, particularly in acute hospital, rehabilitation, and orthopedic settings because the elderly receive most of their treatment in these settings. Occupational therapists with specialized knowledge in a treatment area also will have increased job prospects. Driver rehabilitation and fall-prevention training for the elderly are emerging practice areas for occupational therapy.

Earnings

Median annual earnings of occupational therapists were \$60,470 in May 2006. The middle 50 percent earned between

\$50,450 and \$73,710. The lowest 10 percent earned less than \$40,840, and the highest 10 percent earned more than \$89,450. Median annual earnings in the industries employing the largest numbers of occupational therapists in May 2006 were:

Home health care services	\$67,600
Nursing care facilities	64,750
Offices of physical, occupational and speech therapi-	sts,
and audiologists	62,290
General medical and surgical hospitals	61,610
Elementary and secondary schools	54,260

Related Occupations

Occupational therapists use specialized knowledge to help individuals perform daily living skills and achieve maximum independence. Other workers performing similar duties include athletic trainers, audiologists, chiropractors, physical therapists, recreational therapists, rehabilitation counselors, respiratory therapists, and speech-language pathologists.

Sources of Additional Information

For more information on occupational therapy as a career, contact:

➤ American Occupational Therapy Association, 4720 Montgomery LaNE., Bethesda, MD 20824-1220.

Internet: http://www.aota.org

For information regarding the requirements to practice as an occupational therapist in schools, contact the appropriate occupational therapy regulatory agency for your State.