

Original Article

Professional identity construction: perception of occupational therapy undergraduates¹

Construção identitária profissional: percepção de estudantes de terapia ocupacional

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Abstract

Introduction: Professional identity is built by several factors, however, in the debate among occupational therapists, a divergence appears between a desire for a unique and established identity or complex and dynamic identities. **Objective:** To understand the perceptions of occupational therapy students about professional identity, defining the constituent elements of this process. **Method:** Quantitative-qualitative and descriptive research is composed of thematic analyzes of an online questionnaire, answered by 177 students of undergraduate courses in occupational therapy from 23 Brazilian Higher Education Institutions. It presents the analysis of seven questions (open and/or closed) in search of identity elements, which were categorized thematically into: knowledge, actions and postures; audiences, demands and specialties; and contributions of the profession. **Results:** The use of professional terms, values and postures (such as activity, occupation, care, inclusion, humanization and creativity) are revealed; target audiences (such as people with difficulties, disabilities and conditions related to health, social and education); in addition to procedures and objectives of the practice (such as autonomy, independence and quality of life). The results show the relationship between identity and the search for social recognition, the publics with which the profession is dedicated, identifies demands and constitutes ethical-political commitments, in addition to postures, values, and procedures and objectives of practice, predominantly related to health and rehabilitation. **Conclusion:** The occupations, knowledge, postures, audiences, demands, specialties and contributions of the profession appeared as identity elements of the profession and reveal, through interests, definitions and explanations about the profession, the relationship between the construction of belonging and the multiplicity of international and national epistemic perspectives used in a complementary way and without apparent distinction.

Keywords: Occupational Therapy, Social Identity, Fundamentals, Professional Training.

¹ All necessary ethical procedures were carried out, as per opinion n. 3.929.247 of the Human Research Ethics Committee of the University where the research was carried out.

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Resumo

Introdução: A identidade profissional é construída por diversos fatores, porém, no debate entre terapeutas ocupacionais, aparece uma divergência entre um desejo de uma identidade única e estabelecida ou identidades complexas e dinâmicas.

Objetivo: Compreender as percepções de estudantes de terapia ocupacional sobre a identidade profissional, definindo os elementos constitutivos desse processo.

Método: Pesquisa de método quantitativo-qualitativo e descritivo é composta por análises temáticas de um questionário on-line, respondido por 177 estudantes de cursos de graduação em terapia ocupacional de 23 Instituições de Ensino Superior brasileiras. Apresenta as análises de sete questões (abertas e/ou fechadas) em busca de elementos identitários, que foram categorizados tematicamente em: saberes, fazeres e posturas; públicos, demandas e especialidades; e contribuições da profissão. **Resultados:** São revelados o uso de termos, valores e posturas profissionais (como atividade, ocupação, cuidado, inclusão, humanização e criatividade); públicos-alvo (como pessoas com dificuldades, deficiências e condições relacionadas à saúde, ao social e à educação); além de procedimentos e objetivos da prática (como autonomia, independência e qualidade de vida). Os resultados mostram a relação da identidade com a busca pelo reconhecimento social, os públicos com os quais a profissão se dedica, identifica demandas e constitui compromissos ético-políticos, além de posturas, valores, e procedimentos e objetivos da prática, predominantemente relacionados à saúde e à reabilitação.

Conclusão: Os fazeres, saberes, posturas, públicos, demandas, especialidades e contribuições da profissão apareceram como elementos identitários da profissão e revelam, por meio dos interesses, definições e explicações sobre a profissão, a relação entre a construção de pertencimento e a multiplicidade de perspectivas epistêmicas internacionais e nacionais usadas de forma complementares e sem distinção aparente.

Palavras-chave: Terapia Ocupacional, Identidade Social, Fundamentos, Formação Profissional.

Professional Identity and Occupational Therapy in Brazil

Professional identities are thematized by the sociology of work when seeking and analyzing the dynamics of social recognition of paid work activities, which is a vital aspect of today (Vieira, 2007). Professional identity is commonly addressed in occupational therapy as a unique perspective that unites members of a group and differentiates it from others. When centered on paradigms, it considers shared visions and beliefs that outline concerns and methods of professional practice, constituting its culture and purposes at certain moments of the profession (Kielhofner, 2009; Carvalho, 2012).

French sociologists Dubar et al. (1998) present reflections on professional definitions: a) professions do not exist separated from problems and borders with others, which directly interferes in classification disputes and employment policies; b) professions are not unified, but articulate more or less organized and identifiable professional segments; c) professions are not stable, there are processes of structuring and de-structuring together with cultural forms, political configurations and variable historical times acting in professional construction; d) the professions are not objective, however, the dynamic

relationships between training, work, management institutions and central individual trajectories corroborate understandings about social and personal identities.

Thus, not only collective facts influence identity construction processes, but also individual trajectories, systems of beliefs and practices, habits, life projects and economic, cultural, and social conditions. Just as, conversely, the very “meaning of work is related to the production of identity, since professional identities are the socially constructed forms by individuals of recognizing each other in the field of work and employment” (Vieira, 2007, p. 247).

The influence of context in the formation of identity particularities, in the case of occupational therapy in Brazil, resumes its institution by the International Rehabilitation Movement, under strong North American influence and by the conception of institutionalized occupation and related to labor therapy, with its bases in the biomedical model reductionist positivist and strong influence of the logic of capital and social control (Lima, 2003; Drummond, 2007; Galheigo, 2007).

Reports of professionals trained in the first decades of occupational therapy courses in the Southeast region of the country speak of facing the difficulties of a young profession, mostly composed of women and identified as feminine, based on oral teaching and the scarcity of specific materials, especially national or in Portuguese, as well as professionals/teachers in the area to teach the profession, in addition to their deviant position in the face of hegemonic knowledge and powers (Melo, 2015; Cardinalli, 2017).

From the 1970s onwards, the growing involvement in the fight for the rights of different social groups, the re-democratization of the country and the constitution of social policies, as well as the expansion and collectivization of the concept of health and public assistance in the country, had an impact on changes in the professional perspectives and in the growth of the profession in a particular way in this context. Above all, after 1990, there was a strengthening of the category in the scientific, political, and social spheres, with a decisive professional insertion in Brazilian social public policies. The resizing of the social agenda, citizenship and rights led to ethical-political questioning in occupational therapy, calling for new concepts, terminologies, and practices with expansion of sectors, services, target audiences and professional objectives (Galheigo, 2007; Cardinalli, 2017).

The issue of professional identity has become recurrent for Brazilian occupational therapy due to its contextual singularities that started to diverge from the international references that circulated. In addition, the historically unequal professional insertion in Brazilian regions, with a multiplicity of regional cultural experiences, the expansion of their fields of action associated with multiple social policies and the late specific postgraduate production, for example, corroborated the spraying of the discussion on fundamentals, and made the debate about the identity of the field challenging (Galheigo, 2007; Cardinalli, 2017; Cardinalli & Silva, 2018).

We even found different propositions about the classification of occupational therapy: Machado (1991) considered it as a science, with its own study object, which indicates its purpose; Tassara (1996) evaluated it as a technology for scientifically articulating technical procedures; Castelo Branco (2003), on the other hand, described it as a “quasi-profession”, since, despite having legal recognition, it would still be fragile in social and scientific terms.

Philosophically, the debate about identity in occupational therapy, commonly associated with the idea of crisis, has also received criticism. Galheigo (1999) praised the

transdisciplinary production of his knowledge and that, despite not having an object of study of its own, this is done in multidimensionality and plurality. Lima (1999), in the same sense, envisioned the possibilities of composition of differences and a complex identity construction. Furtado (1999) faced the marginality of their practices as a possibility of independence from the rigidity of scientific systematization, allowing freedom in being and taking care of what one is. Lima (2003), later, reinforced the desire for difference in the attention to the public, in the adoption of references and in the very characterization of the profession.

More recently, the perspective is reversed. Carvalho (2012) observed that, despite the growth of the profession, there remains a great lack of knowledge that bothers part of the occupational therapists, being seen as a difficulty for their practices. Its identity attributes are often questioned, such as its name and its long definitions that, many times, become incomprehensible. The researcher also states that, “to the extent that occupational therapy intervenes with populations that can be considered 'stigmatized' groups, it can, consequently, also occupy this place” (Carvalho, 2012, p. 366).

Some authors start to consider the path of defining a unitary conception for the profession. Fitzgerald (2014) understands that the strengthening of professional autonomy and identity formation could be achieved through a focus on activity and occupation. Escobar & Ruiz (2017) sought in the occupation the common link for professional visibility.

Ferioti (2017) talks about the existence of an expectation of standardization of practices and theoretical foundations in a closed and more stable professional identity. However, he also considers that this delineation of identity is a risk to cultural homogenization, subjecting it to the domination of hegemonic powers and interests. Thus, proposes to analyze the unit in global aspects, which guarantee diversity and individuality. Ferioti (2017), therefore, offers perspectives and complex identities for the profession, as an advantage in the face of the new paradigms and challenges that emerge.

For Morrison Jara & Vidal (2012), the identity crisis that appears in the profession is due more to a redirection of the initially proposed concept than to its loss. And when, in the mid-20th century, occupational therapists reported experiencing problems related to professional identity, attempts to re-analyze the origins of the profession and establish new theories reappeared (Morrison Jara, 2017).

Other works in Chilean and Spanish contexts have also discussed the development of occupational therapy identity as a dynamic process, which combines different factors and transforms over time, relationships, places, socio-historical contexts, and professional fields (Talavera Valverde, 2007; Morrison Jara et al., 2018b).

There are few studies that have quantitatively or qualitatively analyzed the expression of the theme of identity construction among professionals and students of occupational therapy. Research carried out with students, such as that by Ashby et al. (2016) in English-speaking countries, such as Australia, Canada, Ireland, New Zealand, United Kingdom, and United States, and like Morrison Jara et al. (2018a) in Spain, show that identity profiles involve individual processes prior to the beginning of graduate training and personal changes throughout the course, provided by curricular propositions. This invites us to think about the cultural issue involved in educational contexts.

In the Brazilian context, a survey of students and graduates of the Occupational Therapy course at the Universidade Federal de Minas Gerais found that the profession was represented as prioritizing its “doing” more than its “being”, showing greater emphasis on the methodologies of the profession than on its historical basis. The research also shows that identity formation extends beyond graduation, and can change over time (Dutra & Sant’Anna, 2017). This fact also adds procedural dynamics to the theme.

We believe, therefore, that the investigation of professional identity during graduation can reveal crucial processes and themes for the professional characterization and construction of the feeling of belonging. Bearing in mind the particularities of the Brazilian context, we present data from a survey of Scientific Initiation and Course Completion Work called “The perception of occupational therapy students about professional identity”², which sought to understand the expressions of professional identity from the perception of graduate students in occupational therapy in Brazil (Bertossi, 2021).

Methodology

A descriptive research was carried out, considering the mixed method of data analysis, which, according to Creswell (2007), is a mixture of quantitative and qualitative findings. The author highlights the expansion of the methodology, including in the field of occupational therapy, due to the need to combine different types of data and analyzes in the same study. With such a methodology, it was considered the delineation of profiles of the participating people, the analysis of the answered content and the categorization of the perceptions in thematic groups.

For data collection, a questionnaire was developed with 20 questions (13 of them closed or with short answers) about the profile of the respondents and seven about professional identity (five open and two closed), using the Google® form and directed to undergraduate occupational therapy students enrolled in courses at public and private higher education institutions in Brazil.

Regarding the procedures for data collection, a survey of undergraduate courses in occupational therapy active according to the eMEC platform, from the Ministry of Education, was carried out. Of the 68 university records, in 2020, 38 courses were listed as active on the universities' electronic addresses. Thus, the e-mails made available (institutional, from the coordinators or course secretaries) were identified, in addition to pages and groups on social networks (Facebook, WhatsApp and Instagram) aimed at occupational therapy courses or students, academic centers and other contacts made available by universities.

Seeking to expand the dissemination and participation network of students, a dissemination plan was produced, which included a dissemination text; contact channels (emails, accounts and profiles on social networks mapped) and frequencies of submissions or posts, during the two months in which the questionnaire was open for responses.

All ethical procedures for research with human beings were respected. The research was submitted and approved by the Ethics with Human Beings Committee (Opinion n. 3.929.247). The Informed Consent Form was inserted into the form and all respondents agreed to it.

² Developed at the AHTO research center, in the Occupational Therapy Course at the Universidade Federal de São Carlos.

In this article, analyzes regarding seven questions will be presented:

1. "When considering the current fields of occupational therapy, which do you consider the three most representative?" (closed question);
2. "How do you define occupational therapy?" (open question);
3. "How do you usually answer when asked what occupational therapy is about?" (open question);
4. "What terms do you consider fundamental to define occupational therapy?" (closed question);
5. "Would you choose the three most important terms that you use to define occupational therapy?" (open question);
6. "Which characteristic(s) do you identify with, attracts you and/or inspires you in occupational therapy?" (open question);
7. "What do you identify as specificity in occupational therapy that differentiates it from other professions?" (open question).

The results were analyzed quantitatively and qualitatively using tools such as Excel® and Word Clouds spreadsheets. The questions were, initially, statistically analyzed, through the generation of graphs (closed questions), clouds of the most recurrent words (open questions) and categorization of answers, for each question. Then, the analyzes of the answers to all questions (open and closed) were grouped into three thematic categories, proposed based on previous analyzes and discussed between the authors, with support from the literature in the area, in order to identify frequent elements and aspects similar between responses. Thus, we have the following thematic categories: I) Knowledge, Actions and Postures; II) Audiences, Demands and Specialties; III) Profession Contributions.

A non-systematic review of the literature on the identity of occupational therapy was also carried out to contribute to the discussion of the elements involved and to articulate the perceptions of the participants with the discourses in the area.

Results

Regarding the profile of the research participants, based on the data collected by the form, 177 students participated in the study, most aged between 17 and 26 years old. They come from 95 municipalities, 17 Brazilian states and two foreign countries, with a higher prevalence in the Southeast region (63%), with emphasis on the state of São Paulo (37%). They are undergraduates from 23 Brazilian Higher Education Institutions, public and private, from different regions of the country, with 65.5% located in the Southeast, the region with the highest concentration of occupational therapy courses.

Although it was possible to have a relative representativeness (60.5%) of responses, after the expansion of courses in different regions of the country, vacancies continue to be primarily filled by students from the Southeast region, where the highest concentration of courses is located, which inevitably offers certain cultural and identity implications. In addition, the implication of the research being carried out at a university in the state of São Paulo must be considered.

The years of enrollment in the course were mostly 2017, 2018 and 2019, and the participants were more frequently studying the fourth (30%), first (22.5%) and third (19%) years, considering the duration of the courses. courses between four and five years. Most of the students do not have another degree. 123 (69%) of them have already participated in actions in occupational therapy, highlighting the contexts of practical disciplines, extension activities and the curricular internship, implying a type of experienced, tacit knowledge (Marcolino et al., 2017), which qualifies a practical understanding and embodied about the profession, beyond the theoretical content.

The students refer to seeking information about occupational therapy in articles, classes, and books, in that order, however, when they indicate where they obtain more information, the classes stand out. This indicates that, despite the advancement and expansion of publication, training remains strongly supported by oral teaching and the role of teacher(s), tutor(s), facilitator(s), preceptor(s), or reference professionals.

Thematic categories and interlocutions about professional identity

In the category of *knowledge, actions and postures*, theoretical-practical tendencies related to terminologies that bring specificity to occupational therapy and/or its relations with areas of knowledge were included; as well as postures and values perceived in professional conduct in relation to their audiences.

In question 2, about how they define their profession, 88 students (50%) used terms such as: activity (28%), occupation (27%), daily life (12%) and human doing (3%), being illustrated in Figure 1.



Figure 1. Word cloud with terms mentioned to define occupational therapy.

The use of the terms activities (30.5%), occupations (15%) and daily life (11%), and their variations, was also referenced in 95 responses (54%) to question 7, about the *specificity of work in occupational therapy*. Still on this question, 48 (27%) answers referred to human activities/occupations as a study, resource or therapeutic objective; 20 (11%) to the focus/analysis of everyday life; 14 (8%) to work with Activities of Daily Living and Instrumental Activities of Daily Living; 14 (8%) to the profession's view of the subjects; 12 (7%) to the use of meaningful activities; six (3%) to activity analysis. In this question, 23 (13%) answers referred to humanized care; and six (3%) to respect for subjectivity.

Questions 4 and 5 addressed which *terms were considered fundamental to define the profession*. The first question was closed and had 40 terms, being possible to choose as many as wanted. The second was open, and asked to choose three terms that were considered most important.

The following terms were indicated more frequently in closed and open questions (Figure 2), respectively: occupation (85% and 41%), autonomy (84% and 36%), daily life (81% and 27%), human activity (75% and 19%), inclusion (71% and 12%), Activities of Daily Living/Instrumental Activities of Daily Living (70% and 15%), sense and meaning (68% and 19%), accessibility (67% and 3%), health (63% and 8%), activity (52%, 19%), humanization (61% and 8%), participation (60% and 6%), subject (60% and 6%), well-being (59% and 4%), context (58% and 8%) and performance (56% and 6%).

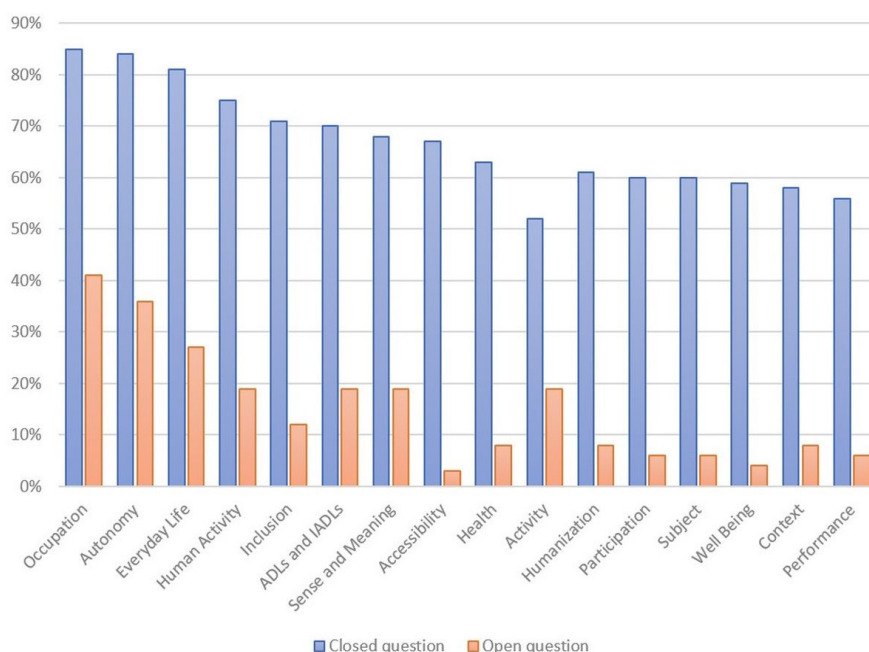


Figure 2. Frequency of terms in questions 4 and 5.

Similarly, in question 6, about the *attractive and inspiring characteristics of the profession*, the following were pointed out: being a profession of care (12%), creativity (10%), focus on the subject's particularities (10%), on potentialities and capacities (7%). Still, 54 (30%) responses included characteristics of professional posture, with emphasis on humanization (12%), empathy (8%) and welcoming (5.5%).

However, when *explaining the profession to other people* (question 3), the participants mentioned more frequently the terms activity, occupation, daily life and doing (21%). Biopsychosocial comprehensiveness/subject (7%), intervention according to demand (3%), consideration of context and complexities (3%), and appreciation of individualities (2%) are also pointed out. Among the answers to this question, objectives of the practice, fields and audiences were reported, which will be presented in later categories, in addition to difficulties in explaining the profession (4.5%) and examples of performance (8%).

The *public, demands and specialties* category presented who actions and reflections in occupational therapy are intended for, considering the thematic focuses of the fields of specialties, age groups and general demands of the publics monitored.

In question 2, about how they define the profession, 57 (32%) answers pointed to areas of activity, with emphasis on the major areas of health (27%), social (10%) and education (9%). Still, six (3%) students pointed out the range of possible fields, without mentioning any directly. Among the cited demands and audiences were people with physical (5%), psychological (5%), social (4.5%), sensorial (2%), cognitive (2%), cultural (2%) and health (1%), as shown in Figure 3. In addition, four responses (2%) indicated people of all age groups as a public.



Figure 3. Word cloud with areas and fields mentioned to define the profession.

In question 3, about how they explain the profession, 58 (33%) students included *fields/areas of activity* in their answers, highlighting: health (25%), mental/psychological health (10%), physical dysfunction (10%), education (9%), social context (4.5%), rehabilitation (3%) and hospital (2%). In the same question, 51 (29%) students used characteristics and demands of the Occupational Therapy public, among them were those with physical difficulties or disabilities (15%), social factors and conditions (11%), mental (9%), psychological/psychic (4%), cognitive/intellectual (4%), emotional/affective (3%), pathologies/diseases (3%), sensorial (2%), and people of all age groups (5%), with disabilities/dysfunctions in general (2%) and individual or collective public (2%).

In question 1, multiple choice, which asked the opinion about *the three most representative fields* of the profession, we have: mental health (58%), physical dysfunction (48.5%), child development (48%), sensory dysfunction (22.5%), hospital contexts (22%) and gerontology (21%) as the most recurrent. However, when asked openly about how they usually explain the profession (question 3), the students included other fields of action in their answers, highlighting: health (25%), mental/psychological health (10%), physical dysfunction (10%), education (9%), social context (4.5%) of rehabilitation (3%) and hospital (2%).

In the third and last category, *contributions from the profession*, the objectives, purposes, and contributions of professional practice appear as an important factor in the students' responses, either to explain it to other people or to show their identification with it. Thus, this category represents the objectives, idealizations and achievements expected from working in occupational therapy.

Among the *objectives pursued* by the answers on the definition of the profession, in question 2, the promotion of autonomy (30%), independence (19%), quality of life (8%), qualification and rehabilitation (7%), stood out. participation, reintegration and social integration (6%), health prevention (5%), adaptations (4%), health promotion (3%), inclusion (3%), engagement (2%) and listening (1%), represented in Figure 4.



Figure 4. Word cloud with objectives mentioned to define the profession.

When openly questioned about how they usually explain the profession (question 3), certain *concepts and actions* were often presented, such as: autonomy (19%), independence (14%), help with difficulties in carrying out activities/occupations (13.5%), rehabilitation (8%), starting/returning to activities they need or want (8%), quality of life (6%), social integration (4%) and recovery (4%), improvement of everyday life (3%), prevention (3%), social inclusion (3%), well-being (3%) and health (3%). The way in which they aim to achieve these goals appeared less frequently, with the most cited being: activities (7%), occupations (7%) and adaptations (4%).

In the answers about the attractive and inspiring characteristics of occupational therapy, in question 6, the objectives of the intervention were also pointed out, such as promoting autonomy (11%), inclusion (7%), independence (5%) and empowerment (4.5%). Similarly, in question 7, to point out the specificity of occupational therapy, they considered the versatility of the profession (6%) and 11 (6%) answers referred to the objectives of the profession, and in six (3%) of them they pointed to the promotion of autonomy, three (1.5%) refer to accessibility, three (1.5%) to activities of daily living, two (1%) to significant activities, two (1%) to care (humanized or integral) and the others responses once mentioned occupations, reality, functionality and reframing.

Discussion

In the results presented regarding the category of *knowledge, actions and postures*, we noticed that the terms refer to a central aspect in professional definitions as elements that corroborate their identification in the search for social recognition and even express field disputes, as already pointed out in the positions of Fitzgerald (2014) and Devery et al. (2018). However, as we can see, there are other elements that are closer to the professional posture and that say as much about its identification as the term chosen to explain it.

Dutra & Sant'Anna (2017) point out, in their research with students and graduates of the Occupational Therapy course at the Federal University of Minas Gerais, the prioritization of professional "doing", evaluating a low permissibility of occupational therapists in placing themselves as subjects. Among our data and analyses, on the other hand, what is done and how it is done, what is shown as values, postures, and ethical-political commitments, to identify the profession.

In this sense, Fitzgerald (2020) understands that a form of identification can happen with the internalization of professional beliefs and values created by the class, resulting in a corresponding behavior. As can be seen in the answers to our survey, there is a great deal of reference in the health area, the main branch of the profession, in the adherence to terms that we relate to professional values and postures.

The postures and values indicated in the answers also indicate the prevalence of pragmatist reference elements. Morrison Jara (2017), when showing central concepts of pragmatist philosophy in the foundations of occupational therapy, refers them to dialogues between different fields, for example, when the first professionals were convinced that the integration of people with disabilities into society promoted a better place for all human beings, that is, being a form of social justice. Thus, tolerance of pluralism, the possibility of coexistence between different truths, the value of diversity and holism show a sense of valuing each person and their life (Morrison Jara, 2017).

Galheigo (2014) proposes a look at epistemologies and trajectories common to Latin America by bringing the identity discussion based on Boaventura de Sousa Santos to consider the transitory character between what is individual and what is collective, valuing the cultural and contextual aspects of profession. In the specificity of Brazilian production, we see the diffusion of the term activity and the issue of creativity in occupational therapy, with roots in the production of Nise da Silveira, for example, as already pointed out by the literature (Castro & Lima, 2007; Cardinali & Silva, 2021).

The *public, demands and specialties* category, on the other hand, corroborated the strong perception of fields related to health, reverberating traditional relationships of the profession and predominant nationally and internationally, which continue to be identified as more representative, however, there is an understanding that education and social contexts and cultural aspects also compose and, possibly, expand its identity and diversify its actions in our country.

Escobar & Ruiz (2017) point out a lack of specific productions of the profession, since the theoretical orientation of occupational therapy was built from different areas. Cardinalli (2017) also shows the reduced percentages of publications by occupational therapists related to topics considered as fundamentals of the profession. However, Galheigo (1999), Lima (1999) and Castelo Branco (2003) had already pointed out the constitution of an integrative vision or conjunctive characteristics in the professional identity that go beyond the fragmentation of reality in the sense of inter/transdisciplinarity, plurality and complexity, as well as criticism (Galheigo et al., 2018).

Despite the variability of the cited publics, they are related by facing stigmatization, exclusion, marginalization and social vulnerability.

Lima (2003) explained that occupational therapy emerged from the logic of capital and the docility of bodies, however, in the interrelationship with populations, it was directed towards the right to difference and diversity. With this, the profession began to jointly occupy this place of submission and difference, but also of resistance to these processes with an ethical-political commitment to the subjects. The author, then, proposes that we assume not only the right but also the desire for difference, just as Furtado (1999) had defended the reversal of the understanding that their condition of marginality is a fragility.

Carvalho (2012) considered that the target population of the profession is the one historically characterized by vulnerability, whether for health or social issues and, based on this, understands that there are implications for the identity of the profession, since the commitment to the needs and rights of this population would promote a sharing of their stigmatization processes.

Even so, we saw little or no indication of the conditions strictly related to the cultural, social, political, economic and historical particularities that converge in the production of deep Brazilian inequality, such as poverty, raciality, violence, expropriation, colonial exploitation and coloniality, or even agendas contemporary issues such as LGBTQI+phobia and ableism, among many.

This fact can also be given by the formulated questions not sufficiently instigating the students to present in their answers relevance about their cultural, social, political, economic and historical conditions and particularities.

In the *profession's contributions* category, we noticed that research on professional identity also reflected on epistemological perspectives that influence it, such as the adoption of the International Classification of Functioning, Disability and Health (ICF), as a reference of the World Health Organization (WHO) or national health and psychiatric reforms. As the focus shifts from disabilities to capabilities and health comes to be understood as community well-being, occupational therapy in Brazil has shifted towards restoring autonomy and social participation (Escobar & Ruiz, 2017; Feriotti, 2017).

However, from the data presented, there is a predominance of objectives that call the area of health and rehabilitation in the global perspective more than in the perspective of national movements guided by citizenship, social rights, and emancipation. Although other fields have been pointed out, as shown in category II, their purposes have not appeared, or it is not understood that they differ from the reasoning of the traditional fields of the profession. In addition, an individualist perspective is maintained in identifying demands and in the search for solutions, that is, with little expression of a more critical look at the conditions, structures and powers involved; reasoning still prevails in the binomial and linearity of disabilities-capabilities and based on standards of normality or social idealization, with some exceptions.

Conclusion

Professional identity in occupational therapy has a field of theoretical-methodological diversity, as well as it can be perceived as a field of dispute, not static and that is directly related to epistemic perspectives and influenced by cultural, social, historical, political, and economic dimensions. The construction of identity in occupational therapy, although it encompasses characteristics of the students, even before graduation, is strongly developed during and after training, depending on the theoretical-practical dynamics experienced and the professional networks that are approached.

The research on the students' perception in relation to professional identity calls for thinking about training in occupational therapy in the specificity of the Brazilian trajectory, looking at the training and thematic spaces and how they are involved in this construction. The construction with their educators in the modules of practice and professional experience was significant, returning to the importance of building tacit knowledge.

The practices, knowledge, postures, publics, demands, specialties and contributions of the profession appeared as identity elements of the profession and as analytical categories, revealing what seems attractive in occupational therapy and how the undergraduates learned to define it or to explain it, showing a relationship between the construction of belonging to the category. This also indicates the reproduction of international and national epistemic perspectives that influence occupational therapy.

The relationship of identity construction with the target audience shows the elaboration itself and an ethical-political commitment in the way it deals with it. But, also, there are still descriptions of its characterization as something unfavorable in the face of an unquestioned social standard and the belief in the possibility of overcoming these issues as a contribution of occupational therapy.

The fields of action that appear to be most representative of professional demands continue to be those related to health, however, it was possible to observe the emergence of other contexts, such as social, education and culture, among the possibilities of expanding the perspective of occupational therapy Brazilian.

The research pointed out identity elements that are not always considered in publications on the identity of occupational therapy, as they are reflective texts. However, the investigation from who is in the early stages of incorporating professional values and perspectives raises dilemmas about the construction of critical perspectives of occupational therapy.

However, this is a brief survey that shows the relevance of deepening the investigation on the perception of professional identity and its possible repercussions in different educational contexts in Brazil, represented by a part of the Brazilian student population of occupational therapy. As limitations, this study does not deepen the investigation into the role of each formative stage in the construction of the professional identity of the students, as well as it does not analyze its data by regions and cultural and contextual aspects of the courses or even considering the differences in the student profile, which makes us suggest that future studies consider other factors that impact on the participants' perceptions.

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Author's Contributions

Thaynara da Silva Bertossi, Isadora Cardinali and Carla Regina Silva actively participated in all stages of manuscript preparation, including: a) conception and design of the work or participation in the discussion of results; b) writing of the manuscript or critical review of its content; c) approval of the final version of the text. All authors approved the final version of the text.

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