

DISSERTATION

SITUATING AN OCCUPATIONAL THERAPY CURRICULUM IN THE LOCAL CULTURE
AND CONTEXT OF TRINIDAD AND TOBAGO AND THE CARIBBEAN: AN
ETHNOGRAPHIC CASE STUDY

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ABSTRACT

SITUATING AN OCCUPATIONAL THERAPY CURRICULUM IN THE LOCAL CULTURE AND CONTEXT OF TRINIDAD AND TOBAGO AND THE CARIBBEAN: AN ETHNOGRAPHIC CASE STUDY

Background and Need

Occupational therapy addresses health and well-being through the use of occupation or purposeful activity (Wilcock & Hocking, 2015; World Federation of Occupational Therapists, 2019b). The demand for occupational therapists is increasing as seen in the growing number of occupational therapy education programs globally. According to the World Federation of Occupational Therapists (WFOT), the number of programs increased by 239 programs or 44% between the years of 2006 and 2016 (World Federation of Occupational Therapists, 2008, 2016b). Many occupational therapy education programs exist in places where the profession is emerging and therefore do not have access to educators and curricular resources. These programs must import textbooks, theories, practice models, and assessments from other countries.

Education and learning scholars posit that culture and context influence curricula and learning (Brown, Collins, & Duguid, 1989; Bruner, 1996, 2009; Lattuca & Stark, 2009; Palincsar, 1998; Young, 1993). Additionally, the WFOT requires that approved programs design curricula to consider the local context (World Federation of Occupational Therapists, 2016a). While culture and context are vital elements of educational programs, many of the borrowed occupational therapy texts, theories, practice models, and concepts originate in Western countries and cultures and may not be effective in all contexts (Hammell, 2009, 2011, 2013; Iwama, 2006). Scholars and educators do not understand how using resources from other cultures and contexts

influence the situated nature of a curriculum and there is no scholarship examining how educators create curricula situated within a local culture and context. Furthermore, educators and scholars have not identified the strategies educators use to situate a curriculum.

Purpose

I used an ethnographic case study to examine the strategies the educators at the Masters of Science in Occupational Therapy at the University of the Southern Caribbean (USC MSOT) in Trinidad and Tobago used to implement a curriculum situated in the local culture and context. I also explored how using external resources influenced the situated nature of the curriculum.

Methods

I conducted an ethnographic case study of the Masters of Science in Occupational Therapy Program at the University of the Southern Caribbean in Trinidad and Tobago. Over eight-months, I immersed myself in the department as a faculty member interviewing educators, conducting focus groups with educators and students, observing classes and department meetings, attending department events, and collecting curricular documents. I wrote analytical memos after focus groups and interviews and kept memos as an audit trail. A transcriptionist transcribed all interviews and focus groups. I kept field notes of all observations. I used inductive open coding and thematic analysis of memos to establish initial codes, which I used later to deductively analyze transcripts, field notes and curricular artifacts. I held member checking focus groups separately with students and educators twice during the study to gain the participants' perspectives on my analyses and to facilitate further analysis.

Findings

Educators in the USC MSOT program *responded to* and *reflected* the local culture and context of Trinidad and Tobago and the Caribbean. The educators *responded to* specific *cultural*

and contextual factors of the local community that students would need to respond to in order to be effective occupational therapists in Trinidad and Tobago and the Caribbean. Educators addressed these characteristics and the accompanying *student local learning needs* through *localizing strategies*. These strategies were instructional processes or curricular strategies that made curricular content, resources, and student experiences relevant to the local culture and context. The educators sometimes *reflected* the local culture and context by mirroring characteristics of the local community in the curriculum. The research resulted in a graphic representation of the findings, the Model of a Localized Occupational Therapy Curriculum.

Discussion

The USC MSOT program was an example of globalization and internationalization. The USC MSOT program exemplified globalization through the international experience of its educators and students, the use of external curricular resources, and its connections to international knowledge communities such as the WFOT. The USC MSOT program demonstrated internationalization by enrolling international students in its program and by offering international fieldwork experiences. Internationalization is the incorporation of international and intercultural elements into post-secondary education (Knight, 2003). The program also demonstrated indirect internationalization because educators indirectly exposed students to other cultures and contexts through external curricular resources. Globalization and internationalization often favor the values and beliefs of Western and developed countries over other countries (Knight, 2004; Samoff, 2013). Therefore, occupational therapy educators need critical occupational therapy education, which builds upon the concepts of critical pedagogy and transformative education theory to help ensure that occupational therapy education is relevant to students and those receiving services in all cultures and contexts.

Conclusion

This was the first study to examine how educators created an occupational therapy program that they designed specifically to meet the needs of a particular place and its people. This study contributed to occupational therapy education scholarship by identifying characteristics of a curriculum situated in the local culture and context and the strategies educators used to connect the curriculum to Trinidad and Tobago and the Caribbean. This study also established a need for critical occupational therapy education in a time of increased globalization of occupational therapy education. Introduction of the Model of a Localized Occupational Therapy Curriculum illustrated current scholarship and the findings of the study. This study initiates the exploration of the methods occupational therapy educators can use to situate curricula in their local culture and context. Furthermore, this study will serve as a guide for educators who want to implement curricula that respond and reflect their local communities. Occupational therapy curricula firmly grounded in their own rich contexts will be best suited to meet the challenges of their local service users.

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Finally, I want to thank my family for constantly supporting me during the dissertation. Their patient and understanding conversations encouraged me every step of the way.

DEDICATION

I dedicate this dissertation to my parents, Jerry and Nancy Roberts. There has never been one moment that you have not been there supporting me and cheering me on, even when I could not hear or see you. I know that I can push myself because I know that you are there. I love you.

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CHAPTER 1: INTRODUCTION

Background

Over one billion people (approximately 15 percent) of the global population has a disability due, in part, to an increasingly aged population and increased chronic health conditions (World Health Organization, 2018b). By 2050, the global proportion of people over the age of 60 will double, increasing the burden on health and social systems (World Health Organization, 2018a). The aged and people with disabilities sometimes have difficulty engaging in the activities of daily life that lead to health and well-being. Occupational therapists work with individuals, communities, and populations to achieve health and well-being through occupation. (World Federation of Occupational Therapists, 2019b). Occupations are purposeful, meaningful activities in which people engage within the context of their daily lives (Dickie, 2014; Wilcock & Hocking, 2015). Occupational therapists may work with individuals to participate in daily occupations such as taking care of children and managing their home. At the community or population level, occupational therapists can also work with people regarding access to participation in occupations such as equal access to work or school for people with disabilities. To meet the demands of an increasingly disabled and aged population, universities and governments have created occupational therapy education programs to educate future occupational therapy practitioners.

According to the World Federation of Occupational Therapists (WFOT), the number of education programs increased by 239 programs (44%) between 2006 and 2016 (World Federation of Occupational Therapists, 2008, 2016b). Educators implement many of these programs in places where the profession is emerging, and many of these programs have limited

resources. These programs may import resources such as textbooks, curricula, theories, practice models, and assessments from other cultures and contexts to implement their programs.

The WFOT, the international occupational therapy professional body, requires that education programs consider the local context when implementing curricula. Although not explicitly stated, learning scholarship appears to inform the WFOT policy. Learning scholarship states that culture and context influence learning (Bruner, 1996, 2009; Lattuca & Stark, 2009; Palincsar, 1998; Young, 1993) and the nature of curricula. Therefore, using curricular resources outside of the context in which they were created may impact students' learning and their ability to apply content (Iwama, 2006). Additionally, however, scholars do not know how educators situate curricula in their local contexts. This ethnographic case study will examine how faculty associated with one entry-level master's occupational therapy program in the Caribbean implemented a curriculum that they had intentionally designed to meet the needs of their local culture and context.

Situating the Study in the Literature

Defining Curriculum

I use Lattuca and Stark's (2009) Academic Plan Model to define curriculum. According to their model, a curriculum is more than a list of courses or content. Rather, a curriculum is a dynamic combination of complex factors that educators and curriculum designers must consider when designing a course or curriculum. A curriculum consists of several elements including purposes of the curriculum, content, sequence of courses, learners, instructional processes, instructional resources, evaluation, and adjustment. In this paper, I will use curriculum to refer to all of the elements as described in the Academic Plan Model. I will use the term program to refer to a specific occupational therapy education department within an educational institution. The

Academic Plan Model also includes external influences and the sociocultural context. External influences include market forces, governmental policies, and disciplinary organization actions. As an international profession, the WFOT significantly influences occupational therapy education in countries where the profession is emerging. According to the Academic Plan Model, sociocultural context includes influences on higher education such as language, social movements, and technology. While all of these elements, as identified in the Academic Plan Model, are part of curricula, I found that literature examining culture in international education tended to target four elements of curriculum: educators, learners, educational processes, and content. I review how the literature addresses each of these elements in Chapter 2.

Local Context Influences the Curriculum

A curriculum is influenced by the context in which it occurs including the sociocultural context (Lattuca & Stark, 2009). The elements of *context* that impact curricula include but are not limited to social, political, economic, health, and education elements. Situated learning posits that learning is optimized when people learn while doing an activity that is naturally occurring within its context (Brown et al., 1989; Young, 1993). People learn in social situations influenced by the people, objects, and cultures around them.

Culture Influences the Curriculum

The assumptions, values, and beliefs of a local culture influence curricula (Bruner, 1996, 2009; Hofstede, 2001; Palincsar, 1998; Schein, 2004; Trompenaars & Hampden-Turner, 2012). *Culture* encompasses the “customs, beliefs, activity patterns, and expectations accepted by the society of which the person is a member...” (Dunn, Brown, & McGuigan, 1994, p. 606). Culture influences the observable aspects of daily life through the assumptions, values and beliefs held by a society or group (Hofstede, 2001; Schein, 2004; Trompenaars & Hampden-Turner, 2012).

Assumptions are the taken-for-granted ideas about what is normal (Beagan, 2015; Castro, Dahlin-Ivanoff, & Mårtensson, 2014; Hooper, 1997), and influence values and beliefs. Schein (2004) stated that values and beliefs are the ideas of what is right and wrong, what ought to be, and what the best solutions to common problems are. Assumptions, values, and beliefs influence *artifacts and practices* (Hofstede, 2001; Schein, 2004; Trompenaars & Hampden-Turner, 2004). Artifacts and practices are the outward manifestations of a culture, or the aspects that people can experience such as behaviors, symbols, rules, and regulations. A curriculum, including its elements of instructional processes and content, are artifacts and practices and therefore reflects the particular culture in which it was created.

Research Need

Requirement and the Need for Situated Occupational Therapy Curricula

It is vital that occupational therapy curricula reflect the local context and culture in which their programs exist in order for educators to educate students that can meet their future clients' needs within their specific communities. The WFOT is the international professional organization that promotes and sets standards for occupational therapy practice and education (World Federation of Occupational Therapists, 2019a). In its Minimum Standards for the Education of Occupational Therapists, the WFOT recommended that educators situate occupational therapy curricula in the local context (World Federation of Occupational Therapists, 2016a). The WFOT (2016a) defined local context as “ . . . a geographical area, such as a whole country, state or distinct political region, that has a characteristic range of health and societal needs, cultural backgrounds, and health and social systems” (p. 21). While this requirement acknowledges the vital influence of culture and context on occupational therapy education and curricula, it did not explain how educators create situated curricula. In this study, a

situated curriculum is one that educators intentionally design to meet the needs of, and reflect the local culture and context of, a particular place. Furthermore, the WFOT requirements did not fully acknowledge the complexities involved when educational programs import curricular resources from one culture and context to another.

Globalization and Occupational Therapy Education

Globalization has allowed people to share education processes, curricular strategies, and curricular materials worldwide. Globalization connects the world through technology, knowledge, and common language (Schugersky, 2013). There are positive aspects to the globalization of education such as the spread of educational technology and resources; however, globalization may prioritize the assumptions and values of more Western countries and cultures over other cultures (Samoff, 2013). I use the term “Western” to refer to countries whose culture shares assumptions and beliefs similar to those of countries of Western Europe and North America. Educators facilitate learning when student and educator assumptions regarding teaching and learning align, while differences in cultural assumptions can be barriers in developing effective curricula (Crabtree & Sapp, 2004; Gervendink Nijhuis, Pieters, & Voogt, 2013). Learner’s cultural assumptions about learning and the instructional processes they participate in also influence their educational performance (Gervendink Nijhuis et al., 2013; Gervendink Nijhuis, Voogt, & Pieters, 2012; Nguyen, Terlouw, & Pilot, 2012; Nguyen, Terlouw, Pilot, & Elliott, 2009; Pham, 2016). While the literature demonstrates that culture influences learning and curricula, the literature does not show what instructional processes educators use to situate a curriculum within a specific culture and context.

Using External Curricular Resources in Occupational Therapy Curricula

Because many of the occupational therapy programs exist in places where the profession is new and where there are no other educational programs, educators must borrow resources from outside of their country. In fact, the WFOT has recommended that new occupational therapy programs collaborate with established programs, which could include exchange of curricular resources and educators (Hocking & Ness, 2004). The WFOT requires that programs situate their curricula in the local context; however, educators may need to import curricular resources such as textbooks, theories, practice models, and assessments that educators and scholars created in another culture and context to establish their educational programs.

Many of the theories and concepts of occupational therapy originate from, and present values and ideas from Western countries. Accordingly, these theories and concepts may not be effective in explaining local phenomena in non-Western cultures (Hammell, 2009, 2011, 2013; Iwama, 2004, 2006). Occupational therapy educators do not know what influence the use of external resources from Western countries has on the implementation of a situated curriculum. An external resource is a curricular resource such as a textbook, theory, practice model, or assessment that was developed in a context or culture other than the one in which it is used. There is no scholarship examining how the use of resources created in, and embodying the assumptions, values, and beliefs of one culture, influences the situated nature of a curriculum in another culture and context. Further, it is unknown what strategies educators use to situate a curriculum in the local culture and context when using external resources.

Purpose and Questions

The purpose of this ethnographic case study was to explore how the educators associated with the Masters of Science in Occupational Therapy Program at the University of the Southern

Caribbean situated their curriculum in the local culture and context of Trinidad and Tobago and the Caribbean. To this end, I explored the following research questions:

1. How do the students and educators of the USC Masters of Occupational Therapy program describe the curriculum as situated in the local culture and context?
2. What are the challenges to implementing an occupational therapy program whose educators seek to situate the curriculum in the local culture and context?
3. What are the strategies for implementing an occupational therapy program whose educators seek to situate the curriculum in the local culture and context?
4. How do students and educators experience the influence of using external resources on the implementation of a curriculum that is situated in the local culture and context?

Theoretical Framework

To summarize the key constructs I interpreted from the literature and to illustrate their inter-relationships, I created the Model of International Cross-Cultural Curricula (Figure 1). I

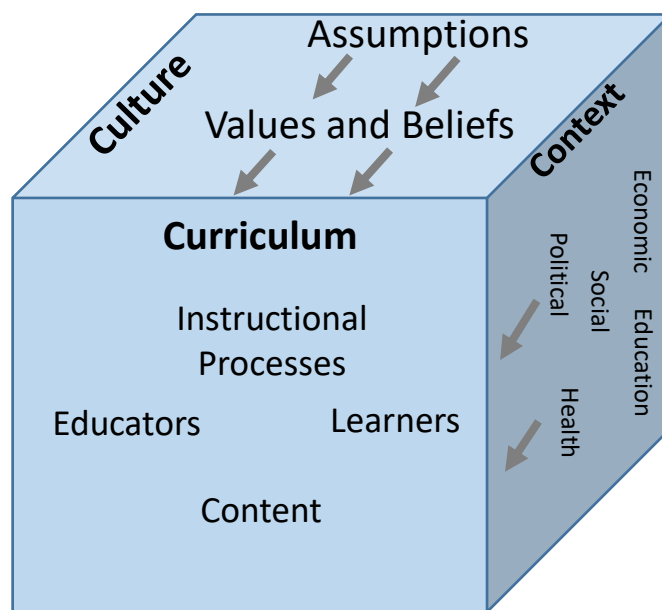


Figure 1: Model of International Cross-cultural Curricula. The model illustrates that context and culture influence curriculum and its elements of instructional processes, content, learners, and educators.

will present the three main components of the model here, and will discuss the model in greater detail in Chapter 2. I conceptualized the model as a cube, because it allows me to represent the three elements of curriculum, culture, and context as interconnected yet distinct. Each of the elements has its own characteristics yet is connected and inseparable. I depicted curriculum and its elements of educators, learners, instructional processes, and content on the front face of the cube because these are elements that people observe directly. These elements of curriculum are included in the model because they were prominent in the literature.

I placed culture on the top face of the cube, behind curriculum, because culture exerts an unseen yet significant influence on curricula. Culture influences the observable artifacts and practices of life, such as curricula, through the assumptions and values and beliefs held by a group. I represent this influence with arrows moving from *assumptions* to *values and beliefs* to *curriculum*.

I illustrated context and its elements on the right face of the cube positioned behind curriculum because the influence of context on a curriculum is also often unseen. Arrows moving from the elements of context demonstrate the influence of the elements of context on a curriculum. The elements of context include, but are not limited to social, political, economic, and educational contexts (World Federation of Occupational Therapists, 2016a).

This conceptualization of how culture and context influence curricula provided a lens through which I viewed the data during the study. While I did not use the categories identified in the model as a priori categories when coding data or constructing themes, I believed that cultural assumptions, largely unseen, and context influenced curricula. However, I was open to new perceptions about how culture, context, and curricula influenced each other.

Significance of the Study

This study identified the characteristics of an occupational therapy curriculum that educators situated in its local culture and context and the strategies educators used to facilitate connection of the curriculum with the local community. Educators *responded* to six specific *local cultural and contextual factors* and corresponding *local learning needs* specific to Trinidad and Tobago and the Caribbean. The educators identified the contextual factors as factors that influence students' learning and future practice and they identified local learning needs as the skills they will need to practice in the local culture and context. The educators used *localizing strategies* to address the local learning needs and local cultural and contextual factors. Localizing strategies are instructional processes or activities that make curricular content, resources, or student experiences relevant to the local culture and context. For example, educators used case studies based on actual local clients to connect content and external resources to the local context.

To a lesser extent, educators also *reflected* the local culture and context. A reflective strategy is one in which a local cultural or contextual quality of the community is seen in the occupational therapy program. For instance, one educator reflected the local community by speaking in a similar way to the students and to many community members.

This study identified the strategies used by the educators at the USC MSOT program in Trinidad and Tobago to implement a relevant occupational therapy curriculum that met the needs of the students and people of Trinidad and Tobago and the Caribbean. The study identified specific ways in which the educators connected external resources that were sometimes not relevant to Trinidad and Tobago to the local community. It is my aim that this study, and the

model generated to illustrate the findings, will be useful for educators who wish to develop curricula relevant to their communities.

Philosophical Paradigm

I am using the constructivist paradigm of inquiry to frame this study as its ontological, epistemological, and methodological tenets align with the purpose of the study. Constructivism holds that reality is a human construction created in the minds of individuals and social groups (Crotty, 1998; Guba & Lincoln, 1994; Lincoln, Lynham, & Guba, 2011). Therefore, reality is relative, co-constructed, and based on individuals' previous experiences and the context in which they experience the phenomenon. This relativist perspective aligns with this study, which sought to understand how the educators of the USC occupational therapy program situated the curriculum in the local culture and context. The relativist ontology of constructivism also means that there are multiple realities (Lincoln et al., 2011). Therefore, in this study I sought perspectives of students, educators, and others to seek varying perspectives.

In this study, I sought perspectives of educators, students, administrators and others associated with the USC MSOT program because, due to the relative and constructed nature of reality, knowledge is subjective (Lincoln et al., 2011). Knowledge is also dynamic and contextual because it will change according to the context, which includes social, physical, and temporal contexts. Constructivism also acknowledges the interpretive nature of inquiry. Therefore, I brought my experiences and perceptions to the study and therefore, I constructed knowledge with the participants.

The ontology and epistemology of constructivist inquiry drove the study's methodology. Constructivist inquiry typically occurs in natural settings because of the relativist and contextual nature of reality. The study occurred in the setting of the USC occupational therapy program, so

that I could experience the curriculum with the participants. Because reality is subjective, I used the common constructivist method of interview to learn firsthand from participants their understanding and experiences of the USC curriculum as situated in the local culture and context. I also used observation of the curriculum and artifact review to learn about how the USC educators created a curriculum responsive to the needs and culture of Trinidad and Tobago.

Researcher Perspective and Positioning

This study was influenced by my research, education, and teaching experience as well as my personal history as a White, gay, American, male. Prior to beginning this study, I reviewed the occupational therapy education, transnational, comparative education, and education literature regarding the role of culture and context on curriculum and situated learning. As presented in Chapters 1 and 2, I formulated a conceptual framework based on the literature that stated that context and culture, made up of assumptions, values, and beliefs, influence curricula. Throughout my graduate education, I have also come to value active, learning- and occupation-centered occupational therapy education, as these are effective in educating future occupational therapists. I also understand, however, that this view is necessarily rooted in my American culture, which may or may not align with other cultures. I am not able to separate myself from these opinions or experiences. As a researcher embracing the constructivist view, I recognized these lenses as I learned about the USC MSOT program with the participants. Writing memos and having conversations with the peer debriefer and participant educators helped me to understand their perspectives and to see that many of our views were similar.

I had limited experience working in academic settings, which may have facilitated and hindered the research process. I did not fully understand the bureaucracy and various institutional influences that affect a curriculum. I knew even less about USC, therefore, I may not have

known what questions to ask or what data to look for. My lack of experience also, however, allowed me to ask questions from a unique perspective that illumined the manner in which the USC educators situated the curriculum in the local culture and context – an issue others had not contemplated. Open dialogue with the educators allowed us to come to new understandings about how educators implemented the program in Trinidad and Tobago.

I am a White, male, American who has enjoyed a privileged life and access to quality public schools, undergraduate, and graduate education. I have not experienced oppression or discrimination based on my ethnicity or skin color. In fact, I acknowledge the economic, social, and political privilege I have received due to my skin color, gender, and nationality. As a gay male, I have experienced discrimination and social stigma; however, my skin color, nationality, and socioeconomic status have allowed me a degree of self-determination that has allowed me to minimize some discrimination due to my sexual orientation.

Trinidad and Tobago and the Caribbean is an ethnically and culturally diverse country. Examining how an academic program implements a curriculum within a diverse context brought up complex issues of race, ethnicity, and class that I cannot fully understand. When entering into conversations with students and educators about race and ethnicity, I tried respectfully to ask them to share their experiences with the clear goal of understanding how it impacted the situated nature of the USC MSOT program. When I did not understand, I would ask for clarification. When uncomfortable about such topics, informal conversations with participants were helpful in providing me with further information on complex subjects.

Study Parameters

This case study was bound by location, time, the participants who were involved, and my particular research interest. The study was limited to the occupational therapy program at the

University of the Southern Caribbean. I chose this site because it was a unique example of an occupational therapy program that was actively taking measures to situate the curriculum in the local culture and context. The study occurred during an eight-month period approximately between November 2017 and September 2018, as determined by a Fulbright Student Grant that funded the study. I limited the participants to: (a) students in the occupational therapy master's program at USC, (b) previous and current educators in the USC occupational therapy program including its director, (c) fieldwork educators, and (d) USC administrators affiliated with the occupational therapy program.

The case study was also limited to describing the USC occupational therapy curriculum as located in the local culture and context and to describing the barriers to, and strategies for, situation in the local culture and context. Questions and observations will therefore explore how educators represent the local culture and context in the curriculum, curricular resources, and instructional processes of the program.

Operating Definitions

This paper uses terms from the fields of social psychology, organizational psychology, education, and occupational therapy. It was also necessary to construct new terms or modify terms to explain adequately the complexities of culture, context, and curricula in an international context. Please refer to Table 1 for definitions.

Table 1: Operating Definitions

Term	Definition
Artifact and Practice	Explicit expressions of culture that people can observe or experience and that carry a common meaning for members of the cultural group (Hofstede, 2001; Schein, 2004; Trompenaars & Hampden-Turner, 2004). These can include behaviors, symbols, and products of a culture.
International cross-cultural curricula	Curricula in which any component of a curriculum such as educators, resources, or instructional processes are transferred from one country to

	another and may represent varying cultural values, beliefs, or assumptions.
Cultural assumption	Unquestioned, invisible, and taken-for granted ideas about what is normal (Beagan, 2015; Castro, Dahlin-Ivanoff, & Mårtensson, 2014; Hooper, 1997).
Local Cultural and contextual factor	Situational factors unique to a specific place that influence students' learning and future practice in that place.
Culture	The “customs, beliefs, activity patterns, and expectations accepted by the society of which the person is a member.” (Dunn et al., 1994, p. 606) “... A blueprint for human behavior... an abstraction, a complex idea in the minds of people and a group possession passed on to successive generations” (Jungersen, 1992, p. 746).
External resource	Curricular resource such as a textbook, theory, practice model, or assessment that is developed in a context or culture other than the one in which it is used.
Local context	“A geographical area, such as a whole country, state or distinct political region, that has a characteristic range of health and societal needs, cultural backgrounds, and health and social systems” (World Federation of Occupational Therapists, 2016a, p. 21).
Localized curriculum	A curriculum that educators design to reflect and respond to the local cultural and contextual factors, meet the local learning needs, and to ultimately meet the needs of the local service users.
Localizing strategy	Instructional process, activity, or curricular approach that make curricular content, resource, or student experience relevant to the local culture and context.
Local learning need	The skills or abilities the students need to address the local contextual factors.
Situated curriculum	A course or program of study that educators design to meet the needs of and reflect the local culture and context of a particular place.
Values and beliefs	The ideas of what is right and wrong, what ought to be, and what are the best solutions to common problems (Schein, 2004).

CHAPTER 2: REVIEW OF THE LITERATURE

I conducted a literature review to explore the scholarship regarding how culture influences occupational therapy education paying special attention to international cross-cultural curricula. International cross-cultural curricula are curricula in which educators or administrators transfer any component, such as educators, content, or instructional processes from one country to another and may represent varying cultural assumptions, values, or beliefs. The literature review began with a single research question: How do culture and context influence occupational therapy curricula that use resources from other countries and cultures? It was evident that there was no research or scholarship addressing this question, so I broadened the question to consider how culture and context influence education more generally. The key concepts of the study -- culture, context, and curriculum -- delimited the scope of the literature review.

Through the review of the literature, I will demonstrate that culture and context directly influence curricula including the elements of content, instructional processes, learners and educators. Because cultures and context influence curricula, different cultures will approach learning, education, and curricula differently. Therefore, it is imperative that occupational therapy educators understand how culture influences learning, especially when attempting to meet the WFOT's mandate to situate curricula in their respective local cultures and contexts.

Methods of the Literature Review

I conducted a modified integrative literature review to explore the research questions. An integrative literature review is a form of research that critiques and integrates literature on a given topic resulting in novel frameworks (Torraco, 2005). For this review, I conducted a search of the literature relevant to international cross-cultural curricula, learning and education. Aligned

with integrative literature reviews, the intention of this literature review was to synthesize and critique the literature to generate new understandings about international cross-cultural curricula that may lead to improved education and guide further research.

With the assistance of the Health and Human Sciences librarian, I searched multiple databases including ERIC, CINAHL, MEDLINE, PsycInfo, and Academic Search Premier. I used combinations of keywords such as culture, cross-cultur*, education, higher education, international, faculty, teaching, and students. I limited initial database searches to peer-reviewed journals and academic texts. I was more successful in finding relevant texts and papers by searching bibliographies for relevant readings. Smaller, spot searches using Google Scholar were helpful in finding specific texts and articles. I broadened the search to include non-peer reviewed texts such as book chapters to be more inclusive of the representative literature from education, occupational therapy, and occupational science.

While I appraised dozens of articles, papers, and books, ultimately I reviewed 34 articles and book chapters that were directly related to international cross-cultural education. Thirteen were empirical articles and 21 were theoretical or descriptive papers or book chapters. I uploaded articles and notes on book chapters into a qualitative data analysis software program. I used coding to analyze the texts. Coding is a process of sorting and categorizing small bits of information (Glesne, 2011). I read the texts and broke the texts into small chunks assigning codes to that chunk of data. While the coding process was largely inductive, the key concepts of culture, context, and curriculum influenced the process. Examples of codes created were teaching styles, context, and self-reflection. The parent codes were: context, culture, culture and curriculum, culture and teaching, paradigms, and research. As the coding process progressed, I combined, deleted, and rearranged code groups. When excerpts of text aligned with each other, I

combined code groups. At other times, I interpreted a code to be one dimension or a smaller category within a larger code. For example, I placed “adaptation of curriculum” as a subcode of “Culture and Curriculum.” Finally, during the writing process, I examined relationships between the codes to construct the findings.

Curriculum as an Academic Plan

After completing the coding process, I used Lattuca and Stark’s (2009) Academic Plan Model to define curriculum and also to evaluate the literature. The Academic Plan Model conceptualizes a curriculum as a “blueprint for learning” with multiple interacting elements including the aims of the curriculum, order of courses, evaluation, external influences, and sociocultural context. In this review, I will use the Academic Plan Model elements of (a) *educators* (b) *learners*, (c) *content*, and (d) *instructional processes* to organize my examination of the literature, as these are the elements that I found in the search of the literature.

The Model of International Cross-Cultural Curriculum

I synthesized the literature by creating the Model of International Cross-Cultural Curricula (Figure 2). I depict the elements of culture, curriculum, and context and their relationships in the figure. I will explain each element as it is presented in the figure. In the Model of International Cross-Cultural Curricula, I represented curricula on the front face of the cube because individuals experience these elements directly. I included the curricular elements of educators, learners, instructional processes, and content because these are the elements that were represented in the literature. I did not list the elements in any particular order, and I did not represent relationships among the elements because that was not the purpose of this study. The purpose was not to represent the teaching and learning process, rather it was to represent what makes up a curriculum and how culture and context influence those elements. Second, as in the

Academic Plan Model (Lattuca & Stark, 2009), the elements are not listed in any particular order because educators approach curricula in various sequences (Lattuca & Stark, 2009). Finally, I did not want to privilege my or any other view of the instructional or curriculum development process in the model.

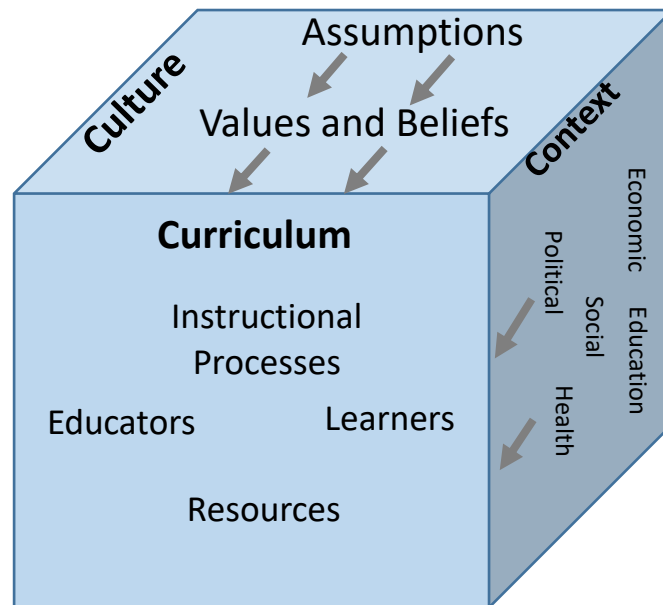


Figure 2: Model of International Cross-cultural Curricula. The model illustrates that context and culture influence curriculum and its elements of instructional processes, content, learners, and educators. Curriculum is represented on the front face of the cube because it can be experienced directly. Culture and its elements of assumptions and values and beliefs are represented on the top face of the cube, behind curriculum, because their influence is often unnoticed. Arrows moving from assumptions to values and beliefs indicate the influence of assumptions on values and beliefs. Arrows leading from values and beliefs to curriculum, an artifact, indicate the influence assumptions, values, and beliefs have on curricula including the curricular elements of learners, educators, resources, and instructional processes. Context is depicted on the right face of the cube. Context is positioned behind curriculum, because the influence of context on curriculum is not directly observable. The arrows moving from the social, political, economic, health, and education elements of context demonstrate the influence of these elements on curricula.

Findings of the Integrative Literature Review

Through my review of the literature, I arrived at five main findings:

- Assumptions, values, beliefs, and artifacts and practices comprise culture.

- The assumptions represented in occupational therapy curricular resources are not universal.
- Culture and context influence curricula.
- Scholars and educators recommended strategies for minimizing the universalization of curricular practices.

Assumptions, Values and Beliefs, and Artifacts and Practices Comprise Culture

Cultural scholars stated that all human behaviors and creations are manifestations of deeply held cultural assumptions and beliefs (Hofstede, 2001; Schein, 2004; Trompenaars & Hampden-Turner, 2004). Curricula are also manifestations of cultural assumptions, values, and beliefs. People of distinct cultures will therefore create distinct curricula, curricular resources, content, and instructional processes and will respond to curricula differently as learners and educators.

To understand how culture influences occupational therapy education and how particular educational practices reflect specific cultural ideals, it is important to distill a basic understanding of culture with which to examine the literature. Culture is "...a blueprint for human behavior... an abstraction, a complex idea in the minds of people and a group possession passed on to successive generations" (Jungersen, 1992, p. 746). The term "blueprint" implies that members of cultural groups have a common set of rules of how to behave; this "blueprint" is often an "abstraction" because these rules for behavior are often unseen. Similarly, in occupational therapy, culture has been defined as the "customs, beliefs, activity patterns, and expectations accepted by the society of which the person is a member..." (Dunn et al., 1994, p. 606). These definitions encompass human behavior as well as the "beliefs" and "expectations" that are common to members of a cultural group including professional groups (Schein, 2004).

I describe culture by synthesizing the models of Schein (2004), Trompenaars and Hampden-Turner (2012), and Hofstede (1980, 2001). Each of these scholars envisioned culture to consist of interconnected levels. While these scholars used different terminology to explain the levels of culture, the concepts are similar. *Assumptions* lie at the deepest levels of the synthesized model. Assumptions are unquestioned, invisible, and taken-for granted ideas about what is normal (Beagan, 2015; Castro et al., 2014; Hooper, 1997). Assumptions influence how people approach the challenges of life such as interacting with the environment and other people (Schein, 2004; Trompenaars & Hampden-Turner, 2012). Assumptions directly influence *values and beliefs*. Values and beliefs are the ideas of what is right and wrong, what ought to be, and what are the best solutions to common problems (Schein, 2004). Values as described in all three models are products of the underlying assumptions and lead to the outward manifestations of culture (Hofstede, 2001; Schein, 2004; Trompenaars & Hampden-Turner, 2004). The outermost level of the model consists of *artifacts and practices*, those aspects of culture that people can observe or experience (Hofstede, 1980, 2001; Schein, 2004; Trompenaars & Hampden-Turner, 2004). *Artifacts and practices* are the outward manifestations of a culture such as behaviors, language, customs, and laws. The theories, models, educational practices, and curricula of occupational therapy and occupational science are therefore artifacts and practices of a particular culture. The artifacts and practices that members of a particular society or culture create are a result of the values of that culture and, most fundamentally, the assumptions held by the members of the society. I represent this in the Model of International Cross-cultural Curricula (Figure 1).

Based on a review of the cultural models presented by Schein (2004), Trompenaars and Hampden-Turner (2012), Hofstede (2001) and the scholars from which they draw, including

Kluckhohn and Strodtbeck (1961), four broad categories of assumptions about how humans respond to life situations appear: (a) the relation of humans and the environment, (b) the nature of human relationships, (c) the relationship of humans and time, and (d) the nature of human activity. Although human behavior is more dynamic and less rigid than these categories represent, these categories are useful in illustrating similarities and differences in assumptions among cultural groups. Individuals will respond to various life situations based on preferences within each category. For example, learners who come from a culture in which human relationships are highly hierarchical may have difficulty asserting themselves in a learning situation; whereas, individuals from cultures that are less hierarchical and more egalitarian may find it easy to speak up in classroom situations.

In summary, cultural assumptions are key to understanding how culture influences curricula because curricular resources, such as the theories and models of occupational therapy and instructional processes such as student-centered learning, are manifestations of cultural assumptions. Educators and learners also manifest assumptions about learning and education in how they perceive education and curricula. In occupational therapy education programs that exist in places where the profession is emerging, educators and program developers may have to borrow resources and educators from other countries and cultures. These external resources and instructional processes may represent, and the educators may hold, different cultural assumptions than those of the community in which the program exists. External resources are curricular resources such as textbooks, theories, practice models, or assessments that the creators developed in a context or culture other than the one in which it is used.

Various Levels of Culture. Scholars posit that the broad categories of assumptions just introduced apply to groups of people of a similar culture. Hofstede (2001) and Hofstede,

Hofstede, and Minkov (2010) added another layer of complexity to the discussion of culture when they claimed that culture also occurs at national, professional, and organizational levels. These levels illustrate that there is some differentiation of culture based on group membership. It is critical, however, to remember that there may be an additional level of local culture that differs from national, professional, and organizational culture. In fact, there are scholars that criticize Hofstede's work for over-generalizing national cultures and de-emphasizing cultural variation within countries (Bovill, Jordan, & Watters, 2015; McSweeney, 2002). Additionally, forces of globalization - which are spreading knowledge, customs, art, and professional practices worldwide - are blurring the lines of culture. Therefore, while I will use these levels of culture with caution, they may be useful in calling our attention to the possibility that influences may come from various groups.

The Assumptions Represented in Occupational Therapy Resources Are Not Universal

Occupational therapy programs, which strive to create curricula that are reflective of, and meet the needs of, the local culture and context, have distinct cultures that reflect rich histories and current situations. The resources these programs use, however, come mostly from Western, Eurocentric cultures and contexts. Many educators may take it for granted that the curricular resources, such as models and theories of the profession, are universal, when in fact using external resources may not be as effective when used in other cultures (Iwama, Thomson, & Macdonald, 2009). Due to a lack of research, occupational therapy educators do not know what influence external resources they have imported from other places have on learning.

There is no literature that states the assumptions of international cross-cultural occupational therapy education. It is possible, however, to uncover the assumptions of the profession by examining the curricular artifacts the profession produces, namely the curricular

resources: the theories, models, and texts taught in occupational therapy programs. Many of the models and theories of occupational therapy and science of the mid- to late- 20th century originated in Western cultures that were mostly White, middle class, heterosexual, and Judeo-Christian (Hammell, 2013, p. 230). Furthermore, scholars have suggested that Western countries exhibit assumptions that are individualist- (Hofstede, 2001; Iwama, 2006; Kinébanian & Stomph, 1992; Schein, 2004; Trompenaars & Hampden-Turner, 2012), achievement-oriented (Beagan, 2015; Schein, 2004; Trompenaars & Hampden-Turner, 2012), doing-oriented (Schein, 2004), future-oriented (Hofstede, 2001; Iwama, 2006; Trompenaars & Hampden-Turner, 2012), and that also value control over nature- (Trompenaars & Hampden-Turner, 2012).

Indeed, scholars have critically evaluated occupational therapy and occupational science for unilaterally representing these Western assumptions. Some popular models and theories have been critiqued for promoting values and assumptions that favor individualism, a controlling orientation to nature (Hammell, 2009, 2011), a future orientation to time (Iwama, 2006), and a doing activity orientation (Laliberte Rudman & Dennhardt, 2008). Such theories and models may not be applicable to therapists working with people from, or to students learning in, non-Western cultures who may have different cultural assumptions (Hammell, 2009, 2011; Iwama, 2004, 2006; Whiteford & Wilcock, 2000). Furthermore, using models and theories that do not represent the local cultural values and assumptions may leave students without appropriate conceptual foundations for practice (Iwama, 2006).

However, there are also scholars who have elucidated the core assumptions of occupational therapy, which may be more aligned with diverse cultural assumptions than is initially apparent. For example, core assumptions that humans are holistic beings who are interconnected with each other and the environment (Hooper & Wood, 2002; Hooper & Wood,

2014; Yerxa, 1993) supports a more collectivist and harmonious orientation to nature than is represented in some of the theories and models of the profession.

The assumptions present in many occupational therapy models and theories are not, therefore, universal. Educators cannot necessarily apply these models and theories in all cultural contexts or with all students, practitioners, and clients (Castro et al., 2014; Hammell, 2009, 2013; Iwama, 2006; Kirsh, Trentham, & Cole, 2006). If assumptions underlying the artifacts of occupational therapy education, such as models and theories, represent a specific culture, then educators cannot assume that those artifacts will be appropriate to teach in a different cultural context.

Culture and Context Influence Curricula

Not only does culture influence the occupational therapy profession and the knowledge that educators teach in occupational therapy education programs, but context and culture also impact curricula. In the previous section, I introduced a model of culture based on the works of Schein (2004), Trompenaars and Hampden-Turner (2012), and Hofstede (1980) that posits that observable artifacts and practices emerge from underlying assumptions, values, and beliefs. I presented literature claiming that because Western assumptions influence the theories and models of occupational therapy, such theories with their embedded assumptions may not be transferrable to other cultures. I will now present a similar argument for curricula, highlighting that cultural assumptions, values, and beliefs influence curricula and that curricular elements such as instructional processes and approaches are not always universal or transferrable across cultures.

Context and curricula. Like a profession's theories and models, curricula are inseparable from the context and culture in which they exist. Models of curricula and theories of

learning posit that context influences learning (Lattuca & Stark, 2009; Young, 1993). Situated learning theory holds that learning is optimized when learners are involved in an activity occurring within the natural context and that people learn in transaction with the people, objects, and cultures around them (Brown et al., 1989; Young, 1993). In the *Minimum Standards for the Education of Occupational Therapists*, the WFOT required programs to situate their curricula in the local context, which includes, but is not limited to, the local social, political, economic, health, and education situation of a location (World Federation of Occupational Therapists, 2016a). The WFOT's policy requiring education programs to situate curricula in the local context appears to be influenced by situated learning theory acknowledging the importance of culture and context in learning and curricula.

Variations in cultural assumptions influence curricula. Artifacts and practices, such as curricula, are manifestations of the assumptions, values, and beliefs of a cultural group (Hofstede, 2001; Schein, 2004; Trompenaars & Hampden-Turner, 2012). Therefore, different cultures will create different curricula based on their assumptions, values, and beliefs (Arnove, 2013; Dimmock & Walker, 2002; Hofstede, 2001; Kempner, 1991; Masemann, 2013). There is no research, however, examining how culture influences occupational therapy programs that need to use resources from other places that may represent assumptions different from those of the local culture. Researchers have illustrated that variations in assumptions such as orientation to time, hierarchical organization of society, and collectivism-individualism can be barriers in cross cultural curriculum development (Gervedink Nijhuis et al., 2012) and in the management and implementation of a transnational business program (Eldridge & Cranston, 2009). While cultural analysis may have helped educators of different cultural backgrounds create a curriculum that has met the needs of the learners (Gervedink Nijhuis et al., 2013), it is not known

what strategies can be used to create curricula that are designed to meet the needs of specific localities and cultures.

Cultural Assumptions Influence Learners, Educators, and the Instructional Processes and Curricular Resources of Curricula

Learners' cultural assumptions influence their expectations and preferences for learning. Learners have preferred and deeply held beliefs and assumptions about learning (Crabtree & Sapp, 2004; Heffernan, Morrison, Basu, & Sweeney, 2010; Hofstede, 2001). Further, some of these are preferences and assumptions of which the learners may not even be fully aware. Learners from different cultures may have different assumptions that influence their expectations and preferences for learning. These assumptions, preferences, and expectations influence how learners will respond to the learning situation including the educators, curricular resources, and instructional processes and approaches.

Learners' assumptions relating how they relate to others, assumptions about hierarchy, and assumptions about relationship to time impacts the efficacy of a curriculum. Learners from collectivist and individualistic cultures may have very different expectations for learning. The purpose of education in an individualistic society is to prepare the individual (Hofstede, 2001). In an individualist society, learners expect educators to treat them as individuals. In a collectivist society however, the purpose of education is to prepare the learner to be a part of the group, and educators may treat students according to their group membership.

The concept of face is an example of how individual factors influence learning. Face is common to some collectivist societies and affects learner behaviors. Face "...describes the proper relationship with one's social environment, which is as essential to a person (and that person's family) as the front part of her head" (Hofstede, 2001, p. 230). The importance of face

is a result of the significance of social context in collectivist societies. Fear of losing face can influence students' willingness to speak in groups, ask questions (Frambach, Driessen, Beh, & van der Vleuten, 2014) or to challenge others out of fear of losing face or causing someone else to lose face (Nguyen, Terlouw, & Pilot, 2006).

Variations in assumptions such as individualist or collectivist orientations, hierarchical society structure, and orientation to time influence learning needs and preferences. Learners also respond differently to educational situations based on the differences in perception of time and the degree of hierarchy common in their culture (Hofstede, 2001). Researchers reported challenges when asking learners of a traditionally hierarchical culture to demonstrate initiative and engage in group work. Regarding differences in time orientation, differences in the importance of a class schedule and punctuality between students and instructors can lead to conflict (Crabtree & Sapp, 2004; Gervedink Nijhuis et al., 2013).

In addition to different assumptions about learning, students' preferences represent another characteristic of students prevalent in the literature on learning and culture. In a qualitative case study of Brazilian master's students taught by a visiting American instructor, the students exhibited a context-dependent learning preference (Crabtree & Sapp, 2004). They attempted to take information learned and make sense of it by applying it to their lives, which contrasted and challenged the American instructor who expected students to work with abstract concepts. Differences in learning preferences and mismatched assumptions about learning can lead to misunderstanding, conflict, and less than optimal outcomes in teaching and learning. Brazilian learners were able, however, to voice concerns about their learning experience as they developed reflectivity (Crabtree & Sapp, 2004). The authors did not, however, expand on how students reflected on the teaching and learning process. If learning styles and assumptions are

congruent among the learners and educators, learning and teaching moves forward with ease.

However when assumptions and expectations for learning are not met, the quality of learning can falter.

Educators' cultural assumptions about teaching and learning influence the implementation and development of curricula. Kubow and Fossum (2007) stated that educators often choose instructional processes based on their values. The Model of International Cross-cultural Curricula (Figure 2) also indicates this relationship between instructional processes and educators' values. However, in a majority of the literature, authors were not explicit about the role of educators' culture and cultural assumptions in the curriculum development and teaching and learning process.

Although authors did not often address the impact of educators' cultures in cross-curricular implementation and development, through a close examination of the literature, readers can infer the role of the educator. For example, challenges in creating curricula arose when curriculum developers' assumptions differed (Gervedink Nijhuis et al., 2013; Gervedink Nijhuis et al., 2012). Conflicting cultural tendencies between the educators of different cultural backgrounds related to time orientation, communication style, collectivism and individualism, and hierarchical social structure made implementing curricula challenging. The educators were able to create a successful program when educators conducted a cultural analysis (Gervedink Nijhuis et al., 2013). Although not explicitly noted in the study, the educators visiting from a different country needed to acknowledge differences in their cultural assumptions about curricula in order to create a successful program.

Researchers also discovered that differences in learners' assumptions and the assumptions represented in instructional processes can influence learning (Nguyen et al., 2012;

Nguyen et al., 2009; Pham, 2016). What was lacking in many of these studies is the acknowledgement of the role of the educators' assumptions in the curriculum development and implementation process and selection of the instructional process. Nguyen, Terlouw, Pilot, and Elliott (2009), Nguyen, Terlouw, and Pilot (2012), and Pham (2016) recommended that educators modify student-centered learning approaches for groups of Vietnamese students to meet the students' cultural needs. The authors did not, however, elucidate the role of the educator in choosing the educational approach. Educators may choose instructional processes and approaches based on their values (Kubow & Fossum, 2007), but we do not understand how this process occurs in international cross-cultural educational situations.

Cultural assumptions influence *instructional processes* and learners' responses to instructional processes. Instructional processes carry the cultural assumptions, values, and beliefs of their culture of origin. In this section, I will examine the influence of culture on learning through review of the literature that explores how instructional processes and learning processes popular today such as student-centered learning work when applied in cultures other than their culture of origin.

Learners respond differently to various instructional processes, partially due to their cultural assumptions about learning. Although popular, instructional processes and approaches such as student-centered learning may not be effective in all cultures and contexts (Frambach et al., 2014; Pham, 2016). The literature illustrates that importing instructional processes from a different culture involves interactions of complex assumptions that often go unexamined. Students from non-Western cultures were challenged when participating in student-centered activities due to cultural assumptions about social hierarchy and an aversion to risk losing face (Bodycott & Walker, 2000; Frambach et al., 2014). Other researchers found that when an

instructional process is aligned with cultural assumptions, some learners work harder (Nguyen et al., 2009), interact at a more complex level, and perform better (Pham, 2016).

In sum, instructional processes and learning occur in the local culture and context. Therefore, when educators take an instructional process or approach out of context and used in another culture, it may not have the expected results. Cultural assumptions based on collectivism and individualism, hierarchy, orientation to time, and how one relates to others are inseparable from learning. In fact, we know that some students have benefitted when educators align their instructional processes with the learner's cultural assumptions (Nguyen et al., 2009; Pham, 2016).

Scholars and Educators' Recommended Strategies for Minimalizing the Universalization of Curricular Practices

In the literature, authors did not directly address how a university or department can situate a curriculum in the local culture and context. They did, however, make recommendations to help improve international cross-cultural education and curriculum development and minimize the universalization of Western education approaches to other contexts and cultures. Authors recommended reflection, training of educators, use of local experts, contextual analysis, formative evaluation, modification of Western-based instructional processes, and cultural analysis to improve international cross-cultural education.

Authors suggested that educators teaching in a culture other than their own reflect on and adapt to the needs and expectations of the students whom they teach (Crabtree & Sapp, 2004). Gervedink Nijhuis et al. (2013) recommended that educators reflect on the role of culture in their own curriculum development process. Scholars pointed to a lack of training for international cross-cultural educators (Bovill et al., 2015; Crabtree & Sapp, 2004) and recommended pre-

departure training in basic cultural knowledge, local language, classroom practices and expectations, and general cultural knowledge to prepare educators who teach in cultures other than their own (Crabtree & Sapp, 2004). Involving local curriculum experts can also facilitate the creation of curricula that are sustainable, relevant, and appropriate (Gervedink Nijhuis et al., 2013; Sheridan, Bennett, & Blome, 2013). Gervedink Nijhuis et al. (2012) recommended educators conduct a contextual analysis at the beginning of an international cross-cultural curriculum development process to identify cultural factors that may influence the process. However, the authors did not explain how to conduct a contextual analysis. Formative evaluation, in which opportunities to improve the curriculum development process are identified, can also improve the contextual validity of the educational intervention (Gervedink Nijhuis et al., 2013; Gervedink Nijhuis et al., 2012). Based on their studies of using student-centered learning processes in Asia, Nguyen et al. (2009) and Pham (2016) recommended modification of student-centered learning (SCL) activities to reflect the local culture. Finally, Thomas (1997) suggested conducting a cultural analysis, which is “an extensive examination of the cultural context of a community, small group, or even an individual” (p. 20). Although the strategies recommended by researchers to reduce the universalization and transfer of values and assumptions from one context to another are not specific to occupational therapy, occupational therapy educators can use these strategies to begin to ensure that occupational therapy literature are more inclusive for people in various contexts.

Summarizing the Literature Review

In this chapter, I explicated the literature reviewed regarding international cross-cultural curricula using the Model of International Cross-cultural Curricula highlighting the gaps in the research that create the need for the case study of the USC occupational therapy program. The

scholarship from educational scholars and social and organizational psychology scholars clearly demonstrated that culture and context influence learning and curricula (Bruner, 1996; Hofstede, 2001; Schein, 2004; Trompenaars & Hampden-Turner, 2012; Young, 1993).

Culture influences all aspects of society and are evident in a society's artifacts and processes, which include products and behaviors such as curricula, instructional processes, curricular resources, and educators' and learners' responses to the learning process. Cultural groups have different assumptions, values, and beliefs (Hofstede, 2001; Schein, 2004; Trompenaars & Hampden-Turner, 2012) and therefore may create different curricula, instructional processes, and curricular resources (Arnone, 2013; Dimmock & Walker, 2002; Hofstede, 2001; Kempner, 1991; Masemann, 2013). Members of different cultural groups may also respond differently to different resources and instructional processes. While scholars and educators understand this on a theoretical level, we do not understand how culture impacts occupational therapy programs whose educators are attempting to situate the curricula in the local culture and context. Additionally, while scholars recognize that the curricular resources of occupational therapy often represent Western and Eurocentric assumptions, values, and beliefs (Hammell, 2009, 2011; Iwama, 2006), scholars do not know how curricular resources influence the situated nature of a curriculum when used outside their cultures of origin.

Assumptions influence learners' expectations and preferences for learning (Hofstede, 2001), however it is not known how using resources from another culture influences the situated nature of the curriculum. Additionally, some instructional processes and approaches are not effective outside of their culture of origin (Frambach et al., 2014; Pham, 2016). Some students have benefitted when student-centered instructional processes are modified to reflect their culture (Nguyen et al., 2009; Pham, 2016), but this has not been studied within an occupational

therapy curriculum. It is also not understood how using instructional processes are chosen, and how they influence the situated nature of the curriculum.

The WFOT (2016a) goes as far to require that occupational therapy programs situate their programs in the local context, however there is no scholarship explaining how programs should do this or describing a curriculum that is situated in the local culture and context. The study of the USC MSOT program study explicates how the occupational therapy program at the University of the Southern Caribbean strove to create a curriculum that was representative of and responsible to the local culture and context of Trinidad and Tobago and will describe the program.

CHAPTER 3: METHODS

Inquiry Paradigm

I framed this study within the constructivist inquiry paradigm because the ontological, epistemological, and methodological tenets of the paradigm align with and support the purpose of the study. A paradigm of inquiry is “... a basic set of beliefs that guides action, whether of the everyday garden variety or action taken in connection with a disciplined inquiry” (Guba, 1990, p. 17). In research, paradigms are sets of parameters within which investigators act. These parameters guide and restrict the purpose and scope of research, the types of questions that will be asked, the types of methods used to gather and analyze data, and the ultimate aim of research (Clark, 1998; Kuhn, 1970). The foundations of a paradigm of inquiry center around three elements: the ontology, epistemology, and methodology of the paradigm (Guba & Lincoln, 1994). The utility of framing a study within a specific paradigm is that it helps to ensure that the study’s purpose, research questions, methodology, and methods align with each other, and it clarifies the researcher’s reasoning and perspectives for consumers of research. Even when not stated, there are always ontological and epistemological reasons for making various research decisions. I will briefly describe the ontology, epistemology, and methodology of constructivism. Finally, I will explain why constructivism was an appropriate paradigm for this study.

The Ontology of Constructivism

The ontology of a paradigm of inquiry refers to what is believed about the nature of reality and what can be known about reality (Guba, 1990; Guba & Lincoln, 1994). At the center of constructivist ontology is the belief that reality—including the phenomena under investigation—is a construction of individuals and social groups in the unique time, location, meanings, and social context in which the phenomenon takes place (Guba, 1990; Guba &

Lincoln, 1994; Lincoln et al., 2011). Individuals' previous experiences and the specific context in which the experiences occurs influence the construction of reality. (Guba & Lincoln, 1994; Lincoln et al., 2011; Merriam, 1991). Therefore, individuals construct multiple realities based on the unique context and their experience. Reality then is co-constructed by individuals and groups interacting with each other (Lincoln et al., 2011).

Within the constructivist ontology, reality is contextual. This view of reality fits the proposed study because this study is explicitly exploring how context and culture influence learning. I also recognize that each student, educator, and other individuals associated with the University of the Southern Caribbean (USC) occupational therapy program had specific experiences influenced by their previous experiences, culture, and the specific context in which they participated in the program. These individuals and groups of individuals, such as the students, co-constructed perceptions or realities of the USC occupational therapy curriculum.

The Epistemology of Constructivism

Epistemology examines what we consider to be knowledge (Pallas, 2001), how we come to know what we know (Crotty, 1998), and the relationship between the knower and the known (Guba, 1990; Guba & Lincoln, 1994). Constructivism has a subjective and transactional epistemology (Lincoln et al., 2011). In constructivism, knowledge is largely subjective because it is created by individuals or groups (Guba & Lincoln, 1994; Lincoln et al., 2011). Knowledge is transactional because it is co-created (Lincoln et al., 2011), and it is influenced by the social and environmental contexts (Lincoln & Guba, 1985; Lincoln et al., 2011). Knowledge is always changing because it is contextual and contexts are constantly changing (Merriam, 1991). Individuals have different life experiences, which lead them to construct knowledge differently and therefore to have different perspectives, which color their construction of future knowledge.

Because knowledge is subjective and individuals and groups of individuals have a unique perspective on phenomena, in this study, I wanted to learn about students', educators', and others' experiences of the USC occupational therapy program and how they perceived culture and context in the curriculum. I wanted to hear the participants' stories about their experiences in the curriculum because they had different perceptions. Because I believe that participants and researchers co-create knowledge, I sought to immerse myself in the curriculum to be able to understand the context of the program. Knowledge is dynamic and contextual, therefore I endeavored to seek participants' perspectives at various times throughout the study to understand different situations and the evolving views of the participants.

The Methodology of Constructivism

The relativist ontology and subjective-transactional epistemology of constructivism determined the methodology used in the paradigm. Methodology is how individuals or researchers create and acquire knowledge (Guba, 1990; Guba & Lincoln, 1994). The relativist ontology of constructivism and the contextual contingency of reality is suited to research that occurs in natural settings (Guba & Lincoln, 1989). Simulating an experience will not elicit the same co-construction of reality or knowledge that occurs in natural settings. Therefore, I conducted this study entirely within the USC occupational therapy program as it occurred without intervention or modification.

Humans are the key research instrument in constructivist inquiry because humans experience, take in and interpret data, and adapt to the changing context in attempting to understand the pertinent elements of the phenomenon (Guba & Lincoln, 1989). Additionally, because reality is co-constructed and knowledge is subjective, research should be done with participants using techniques that elicit participants' unique perspectives (Guba, 1990). For that

reason, constructivists often use interviews, observation, and review of texts, all methods that I used in this study of the USC occupational therapy program. The researcher's presence alters the environment in which the research takes place and cannot be considered completely naturalistic. I acknowledge this reality and understand that this research was an opportunity for participants and me as the researcher to construct knowledge together.

Constructivist inquiry is also hermeneutic and dialectic (Guba, 1990). The inquiry process is hermeneutic, meaning that research happens in an interpretive cycle in which data collection leads to interpretation and new understanding of the situation which leads to further data collection, refinement of interpretation, and so on (Lincoln et al., 2011). The process is dialectic in that the researcher compares and contrasts different perspectives in order to arrive at a better understanding (Guba & Lincoln, 1989). In this study, data analysis occurred throughout the study allowing for interpretation and understanding to develop and research questions to evolve throughout the eight-month study.

Inquiry Paradigm Rationale

The ultimate aim of constructivist inquiry aligns with the purpose of this study. Lincoln, Lynham, and Guba (2011) stated that the inquiry aim of constructivism is "to understand and interpret through meaning of phenomena (obtained from the joint construction/reconstruction of meaning of lived experience)" (p. 106). This was also the purpose of my study – to derive a better understanding of the USC occupational therapy program as a curriculum situated in the local culture and context of Trinidad and Tobago and the Caribbean by co-constructing knowledge with the students, educators, and administrators.

The constructivist's position on values, the importance of the participant's voice in research, and the goal that research leads to action also aligned with my aims for this study.

Constructivism acknowledges that values cannot and should not be separated from the research process and therefore, researchers attempt to understand the values of the participants and themselves through dialogue (Lincoln et al., 2011). I do not believe that a researcher can or should separate themselves from their values, and I believe that a better understanding of the participants' and my own values through dialogue will strengthen the study.

Constructivist inquiry strives to present not just the perspective of the researcher but a combined reconstruction of knowledge that includes the researcher and participants (Lincoln et al., 2011) This aligns with my aim to construct a new understanding of the USC occupational therapy program as situated in the local culture and context, with students, and educators. Another aim of constructivism is for the research process to be a catalyst for action. While this is not the primary purpose of the study, I want the director of the program and the other educators to have improved insight on the situated nature of the curriculum and to make changes in the program, if necessary, to strengthen how the curriculum represents and is responsible to the local culture and context.

Finally, my purpose of the study is to describe and understand the USC occupational therapy program as a program situated in its local culture and context. The only way to understand this is through the perspectives of those people who experience the program. Constructivism provides a philosophy and mechanism to build knowledge with the people who experience the phenomenon. In the constructivist's view, because reality is relative and knowledge is subjective, the only way of understanding a phenomenon such as this is by constructing knowledge with those who experience the phenomenon. Therefore, the use of interviews and focus groups as a way of constructing knowledge with participants aligns with the tenets of constructivism.

Research Design

To explore the research questions, I completed an eight-month ethnographic study in which I participated with the USC MSOT students and educators as a member of the curriculum's faculty. I interviewed educators and conducted focus groups with educators and students to understand their experiences of the USC MSOT program as a situated curriculum as well as the influences of culture and context on the curriculum (See Appendix A). At the same time, I observed classes and department meetings, taking field notes and getting to know the educators and students. I also had the opportunity to teach a course in the program, deepening my familiarity with the students and the complexities of practice within Trinidad and Tobago and the Caribbean from the students' perspectives. About halfway through the study, I expanded interviews to include perspectives of fieldwork educators and administrators that had experience with the curriculum. Throughout the program, I requested that educators give me syllabi, course descriptions, assignments, and program documents. I conducted member checking twice during the study with students and educators to verify my findings and to analyze findings further with the participants (Morse, 2018).

Positioning the Study as an Ethnographic Case Study

An ethnographic case study is a study in which observation occurs over an extended amount of time within a bounded system and explores issues of culture (Angers & Machtmes, 2005; Willis & Jost, 2007). In this study, while my primary focus was to describe the USC occupational therapy program as a curriculum situated in the local culture and context and how educators situated the curriculum, I was also interested in how culture influenced learning and the situated nature of the curriculum. Furthermore, I used ethnographic data collection methods throughout the study. Therefore, describing the study as an ethnographic case study was

appropriate. Aligned with a constructivist approach, conducting an ethnographic case study using methods such as interviews, focus groups, observation, and document analysis within the natural environment of the USC occupational therapy curriculum allowed me to learn the students' and educators' perspectives. Participating in many aspects of the curriculum gave me the opportunity to construct knowledge with the participants. I will briefly describe the features of case studies and ethnography in this study.

Case study. Case studies examine a phenomenon within a specific context (Yin, 2014) aligning with constructivism's relativist ontology claim that reality is contextual. A case can be a single or multiple individuals, organizations, events, or locations (Creswell, 2013; Schwandt & Gates, 2018). Cases have bounds or limits, which can include time, location, and individuals (Creswell, 2013; Yin, 2014). In this study, the case is the USC occupational therapy Master's program. The case was bound in time to the duration of the eight-month study and by participants, namely the particular students and educators in the program as well as administrators and fieldwork educators.

Case studies have three specific features; they are particularistic, descriptive, and heuristic (Merriam, 1998). Case studies are particular in that they focus on a specific phenomenon. In this study, the focus was how the educators of the USC occupational therapy program situated the curriculum in the local culture and context. Case studies are descriptive in that they result in a rich account of the phenomenon. Case studies are heuristic because they attempt to facilitate new understanding of the phenomenon. In this study, the ultimate product was a rich description of the USC curriculum that illuminated how the educators situated the curriculum and the role of culture and context in learning.

Different scholars have identified different types of case studies. Stake (1995) identified two types of case studies: intrinsic and instrumental. In an intrinsic case study, the aim is primarily to understand the case. In an instrumental case study, the researcher aims to learn about a phenomenon or situation beyond the specific case. In this study, I chose the case of the USC occupational therapy program primarily for its instrumental value, but it also has intrinsic value. Instrumentally, studying the USC occupational therapy program provided understanding about how programs that must use external resources and are in places where occupational therapy is emerging situate themselves in the local culture and context. Intrinsically, this study sought to expand understanding about how this specific program situated its curriculum in the local culture and context. Information learned may help the director of the occupational therapy program adjust the curriculum to continue to serve the needs of Trinidad and Tobago.

The interpretive nature of case study (Merriam, 1998; Stake, 2000) afforded me the opportunity to use the data to examine the Model of International Cross-Cultural Curricula (Figure 2) as proposed in Chapter 2, based on my interpretation of the literature. Merriam (1998) described an interpretive case study as one in which "... descriptive data are used to develop conceptual categories or to illustrate, support, or challenge theoretical assumptions held prior to the data gathering..." (p. 38). In this study, I aimed to develop a more complete understanding of how culture and context influences the USC MSOT curriculum as well understand how the educators situated the curriculum in the culture and context of Trinidad and Tobago and the Caribbean.

Researchers do not conduct case studies to generalize to other situations. However, as certain situations arise repeatedly within a study, it is reasonable to make generalizations within the specific case and refine that generalization during the study (Stake, 1995). Researchers can

modify “grand generalizations,” or what people take for granted, through case study research. It was my aim that as situations arose repeatedly in this study, the educators and director of the program would learn about their curriculum and make adjustments to strengthen the situated position of the curriculum. These repeated situations also helped me to identify patterns and to understand the situated nature of the program.

Ethnography. In this ethnographic case study, I used data collection methods common to ethnography as they allowed me to construct knowledge with the students and educators of the USC occupational therapy program. In ethnography, inquirers intend to develop a deep understanding of a cultural group, and to develop an understanding of the beliefs, behaviors, and values of a group (Creswell, 2013). In describing ethnography, Spradley (1980) distinguished culture from a social situation. A social situation is “... the stream of behavior (activities) carried out by people (actors) in a particular location (place)” (p. 86). It is possible to observe and participate in a social situation whereas culture is a pattern of “behavior, artifacts, and knowledge that people have learned or created” (Spradley, 1980, p. 86). By interviewing participants, observing classes and meetings, and participating in the USC MSOT program, I attempted to uncover patterns and learn about the culture of the department.

Case Selection

In instrumental case studies, the primary goal is to choose a case that will provide the most information about the topic (Stake, 1995). It was critical to locate and choose a case that allowed me to (a) explore the challenges and solutions to situating an occupational therapy curriculum in the local culture and context, (b) examine the characteristics of the program as situated, and (c) explore how using external resources influenced the situated nature of the program. Through personal contacts and key informants, I became aware of three possible sites

for the study. After considering the characteristics of each, it was clear that the USC MSOT program was uniquely suited to be the case for this study. First, the USC occupational therapy program was a new program that admitted its first students in September 2016. It was the first occupational therapy program in Trinidad and Tobago and the first occupational therapy master's program in the Caribbean. The program, therefore, had fewer resources and administrators needed to import resources to implement the program. Second, the director and program founder explicitly designed the curriculum to meet the WFOT standard requiring that educators situated the curriculum in the local culture and context of Trinidad and Tobago and the Caribbean. She conducted research with local stakeholders exploring the challenges and potential strategies to creating a Master's program in Trinidad and Tobago and integrated these findings into the curriculum (Garcia, Kugel, Javaherian-Dysinger, & Huecker, 2016). Therefore, she and the USC occupational therapy program were uniquely motivated to engage in research exploring how the curriculum was situated in the culture and context of Trinidad and Tobago. Finally, a Fulbright Student Grant made eight months of my intense study in Trinidad and Tobago possible.

Context of the USC MSOT program. The USC MSOT program is a graduate program within the University of the Southern Caribbean. The university is in Maracas, St. Joseph on the Island of Trinidad in the West Indian country of Trinidad and Tobago. Trinidad and Tobago, a two-island country, has a total population of 1.3 million people of which 95% live within the island of Trinidad. The official language of the country is English; however, citizens also speak Creole languages and Hindi. Trinidad and Tobago is a culturally and ethnically diverse country due to its complex history. The country was originally inhabited by indigenous people before being colonized by the Spanish in the 16th century (Brereton, 2009). French immigration began in the late 1700s. At approximately the same time, planters began to enslave people from West

Africa to increase the productivity of Spanish land. The British gained colonial power in 1797, and the Caribbean people of African descent achieved emancipation from slavery in 1838. Following this emancipation, planters brought people from India as indentured servants to address the need for cheap labor.

The USC MSOT program is a graduate program within the University of the Southern Caribbean. The university is a private institution affiliated with the Seventh-Day Adventist Church (University of the Southern Caribbean, 2018c). The purpose of the university is to “... transform ordinary people into extraordinary servants of God to humanity through a holistic tertiary educational experience” (University of the Southern Caribbean, 2018b).

The director of the USC MSOT program designed the curriculum to meet the needs of Trinidad and Tobago and the Caribbean. The director and other interested parties wanted to found a program in Trinidad and Tobago because of the need for therapists. There are 25 occupational therapists in Trinidad and Tobago (Trinidad and Tobago Occupational Therapy Association, 2018) when an estimated 250 are needed (Garcia et al., 2016). The director and other occupational therapists advocated for the new occupational therapy educational program to help provide a solution for the unsuccessful recruitment and retention of therapists to Trinidad and Tobago and the Caribbean. Recruitment of foreign occupational therapists did not provide a long-term solution and government scholarships did not provide the number of therapists needed to serve the demand in Trinidad and Tobago, which was facing an increasingly aging population. Therefore, the director of the program conducted research as part of her doctoral studies to support the design of the USC MSOT curriculum. The director conducted a survey and semi-structured interviews with stakeholders representing health care professionals, disability organizations, consumer groups, educators, government agencies, and occupational therapists to

understand the barriers and strategies to starting an educational program in Trinidad and Tobago. The director identified five themes, which led to the creation of five curricular threads, which guide the current curriculum: (a) occupational justice and professional advocacy, (b) scholarship of teaching and learning, (c) experiential learning through fieldwork and service, (d) compassionate practitioner, and (e) evidence-based practice.

The USC MSOT educators designed the current curriculum to be eight semesters long and to consist of 1,180 clinical placement hours. The mission of the department is to "... graduate individuals who, having undergone transformative education in occupational therapy, are prepared to be competent entry-level clinicians and future leaders in the profession" (University of the Southern Caribbean, 2016). The director of the program created the program to align with the WFOT's Minimum Standards for the Education of Occupational Therapists (World Federation of Occupational Therapists, 2016a) as well as local accreditation requirements.

Participants

Within the case of the USC MSOT program, a number of people contributed to the study by participating in interviews, focus groups, consenting to observation, and by providing copies of curricular documents. The participants included students, educators, fieldwork educators, and administrators in the USC occupational therapy program. During the study, there were two cohorts of students in the master's program, for a total of 14 students. There were six full and part time educators in the program including the director of the program. I used criterion sampling to select students and educators for the study. Criterion sampling means that participants meet specific requirements (Creswell, 2013). Inclusion criteria for students were: (1) enrolled in the USC MSOT program, (2) willing to be observed in occupational therapy

program activities, (3) willing to participate in focus groups, and (4) willing to provide written perceptions of their experiences in the course taught by the researcher. Inclusion criteria for the educators, including the director of the program, were: (a) currently or having previously taught a course in the USC MSOT program, (b) willing to be observed in occupational therapy program activities, (c) willing to participate in focus groups or interviews. Inclusion criteria for USC administrators were: (a) administrator of USC familiar with how educators situated the curriculum in the local culture and context and (b) willing to participate in observation, interviews, and or/focus groups. Exclusion criteria for all groups included not meeting the stated inclusion criteria. All of the students and educators consented to participate. For the student and educator focus groups, all participants were invited. I attempted to schedule the sessions at times as convenient as possible for the participants. Not all students or educators, however, were able to attend each group.

I used snowball sampling to identify fieldwork educator and administrator participants for the study. Snowball sampling uses key informants to identify potential participants that may be able to provide information related to the research questions (Creswell, 2013; Glesne, 2011). The program director and other educators acted as key informants and identified fieldwork educators and administrators who would be able to share their understanding about how the program situated its curriculum in the local context and the influences of the culture and context on the program.

Prior to beginning the study, I received approval from the ethical and institutional review boards (IRB) from my home institution, Colorado State University, and the University of the Southern Caribbean. Students and educators received copies of the consent form. I also met with the students and educators before the study began to explain the purpose of the study and answer

any questions before initiating the study. I met individually with the fieldwork educators, one of the educators, and with two administrators remotely who could not meet as a group to explain the study, review the consent form, and answer questions. I uploaded signed consent forms to a secured server and destroyed the originals. All educators and students consented to participate in the study. One student did not complete all components of the study because she did not meet all requirements for the program.

Participant Demographics

See Table 2.

Table 2: Demographic Data of Participants

	Educators <i>n</i> = 6 (25.0%) <i>n</i> (%)	Students <i>n</i> = 11 (45.8%) <i>n</i> (%)	Fieldwork Educators/ Administrators <i>n</i> = 7 (29.2%) <i>n</i> (%)	Total <i>n</i> = 24 (100.0%) <i>n</i> (%)
Age				
21-30	1 (4.2%)	8 (33.3%)	1 (4.2%)	10 (41.7%)
31-40	3 (12.5%)	2 (8.3%)	3 (12.5%)	8 (33.3%)
41-50	1 (4.2%)	1 (4.2%)	2 (8.3%)	4 (16.7%)
51-60	1 (4.2%)	0 (0.0%)	1 (4.2%)	2 (8.3%)
Gender				
Female	6 (25.0%)	11 (45.8%)	7 (29.2%)	24 (100.0%)
Ethnicity				
Afro Trinidadian	4 (16.7%)	8 (33.3%)	3 (12.5%)	15 (7.5%)
Asian Trinidadian	1 (4.2%)	1 (4.2%)	1 (4.2%)	3 (12.5%)
European Trinidadian	2 (8.3%)	0 (0.0%)	0 (0.0%)	2 (8.3%)
Black	0 (0.0%)	2 (8.3%)	1 (4.2%)	3 (12.5%)
Caucasian	0 (0.0%)	0 (0.0%)	2 (8.3%)	2 (8.3%)
European	1 (4.2%)	0 (0.0%)	0 (0.0%)	1 (4.2%)
Guyanese	1 (4.2%)	0 (0.0%)	0 (0.0%)	1 (4.2%)
Indo Trinidadian	2 (8.3%)	1 (4.2%)	2 (8.3%)	5 (20.8%)
Indian Hispanic	1 (4.2%)	0 (0.0%)	0 (0.0%)	1 (4.2%)
Mixed	1 (4.2%)	1 (4.2%)	1 (4.2%)	3 (12.5%)
Portuguese/Venezuelan	0 (0.0%)	0 (0.0%)	1 (4.2%)	1 (4.2%)
Trinidadian-American	1 (4.2%)	0 (0.0%)	0 (0.0%)	1 (4.2%)
White	0 (0.0%)	0 (0.0%)	1 (4.2%)	1 (4.2%)
Nationality				
Canada	0 (0.0%)	0 (0.0%)	1 (4.2%)	1 (4.2%)
Dominica	0 (0.0%)	2 (8.3%)	0 (0.0%)	2 (8.3%)
Trinidad and Tobago	6 (25.0%)	9 (37.5%)	3 (12.5%)	18 (75.0%)
United Kingdom	0 (0.0%)	0 (0.0%)	1 (4.2%)	1 (4.2%)

United States	1 (4.2%)	0 (0.0%)	3 (12.5%)	4 (16.7%)
First-generation	1 (4.2%)	5 (20.8%)	2 (8.3%)	8 (33.3%)
Attended a foreign:				
Primary/secondary	1 (4.2%)	4 (16.7%)	4 (16.7%)	9 (37.5%)
school				
University	6 (25.0%)	4 (16.7%)	7 (29.2%)	17 (70.8%)

Note: A total of 27 students, educators, fieldwork educators, and administrators participated in the study. Three students did not return the demographic forms.

Methods of Data Collection

In this ethnographic case study, I used ethnographic data collection methods such as interviews, participant observation, and artifact review to understand how an occupational therapy program situates itself in the local culture and context. In the study, I also described the curriculum as situated in the culture and context, and described the barriers to and strategies for situating the curriculum in the local culture and context. Table three details methods of data collection.

Table 3: Data Collection Methods

Type	Quantity
Interview	13 total interviews 7 educator interviews, 4 fieldwork educator interviews, 2 administrator interviews (3 total administrators)
Focus Group	14 total focus groups 7 student focus groups, 3 educator focus groups
Observation	151 hrs. 83 classroom observations, 5 faculty meetings, 2 student/faculty meetings
Artifact	141 documents
Written Response	32 statements

Interviews and Focus Groups

At the beginning of the study, I interviewed educators and conducted separate focus groups with the educators and students. These interviews and focus groups occurred concurrently

with my classroom and department meeting observations. I held all individual interviews with educators, fieldwork educators, and administrators and focus groups with educators or students in quiet and private class rooms or offices with few planned interruptions. The interviews allowed participants to share experiences and opinions they may not feel comfortable sharing in a group. I interviewed each educator, fieldwork educator, and administrator one time. I interviewed each fieldwork educator and administrator individually with the exception of two administrators who requested that I interview them together as they felt they would help each other remember how they had helped the director of the USC MSOT program develop the program's curriculum. The interviews ranged in duration from approximately 41 minutes to one hour 22 minutes with a mean time of approximately 57 minutes.

Student focus groups and educator focus groups allowed participants to share and create ideas together. Focus groups were especially effective for member checking when participants gave feedback regarding my perspectives and analyses and offered their own viewpoints. I chose to collect data with students using focus groups only because, I felt that, being a visiting instructor, they may be more secure answering questions about the program in small groups. The educators attended three focus groups as a group. The first year students attended three focus groups as a single group, and the second year students attended four focus groups. The second year students were a larger class, and I divided them into smaller focus groups. I held the educator and student focus groups separately, and they ranged from approximately 45 minutes to 2 hours 21 minutes with a mean duration of one hour 22 minutes.

I recorded the interviews and focus groups with a digital audio recording device and took notes during the interview or focus groups. The interviews and focus groups were semi-structured, guided by prepared, open-ended questions (Appendices B-L). I used the questions as

guides for the interviews and focus groups, and I would often follow-up the participants' comments with unplanned questions if that appeared to provide more information regarding the research purpose.

Participant Observation

To understand the ways in which the USC MSOT educators situated their course curricula in the local culture and context, I observed 151 hours of class and department meetings. To ensure observation all of the classes, I observed all of the classes of the January – May semester for the first two weeks of the semester. I then began observing half of the classes each week alternating observing the morning and afternoon classes. I recorded my notes in a laptop computer. I repeated this process with the Summer Semester for the course taught by the instructor I had not yet observed. I documented classroom discussion, what curricular resources educators used, students' responses, and issues that arose in department meetings. Throughout the eight-month study, I was included as a full faculty member of the USC MSOT program and therefore, I attended seven of the department meetings and most University faculty and staff meetings. I informally participated and observed in university faculty and staff meetings, USC MSOT informational sessions, and community occupational therapy awareness outreach programs. During these events, I did not take notes; but they did inform my understanding and interpretation of formal observations, interviews, and focus groups.

Curricular Artifacts

I requested that educators give me copies of their course documents, which would exemplify their teaching resources, techniques, processes, and assignments. From these, I hoped to learn about how culture and context influenced their teaching or how they thought about

culture and context. I collected 141 documents including syllabi, assignment descriptions, and program documents.

Written Statements

During the study, I taught the course, Community-based Occupational Therapy I, to second-year students. Teaching this course was a unique opportunity to explore with the students the influence of a visiting educator on a curriculum that was trying to meet the needs of the local community. Teaching students who were also research participants raised ethical concerns regarding a teacher using his students as study participants. With IRB approval, I elicited the students' responses to written questions during my course. The students answered the questions in writing when I left the class. A student then took the responses to a non-staff member, who kept them in a locked cabinet until after I had finalized grades for the term. Additionally, a transcriptionist transcribed the answers. Then I was able to review and analyze the students' answers. On another occasion, to understand students' perspectives on teaching and learning, I asked students to complete the statements "An instructor's job is to..." and "Students learn best when..." I received a total of 32 written statements.

Data Management

I managed data to maintain the confidentiality of the participants. Following interviews and focus groups, I uploaded the digital audio files to a secure server. A transcriptionist transcribed the recordings, and I stored the files as secure Word documents on the server maintained by Colorado State University. I reviewed all transcriptions for accuracy. Audio and corresponding transcription files were assigned a file name as to maintain the confidentiality of the participant. I uploaded field notes recorded in a laptop were uploaded daily to the secure server. I scanned hardcopies of curricular artifacts into softcopies and then scanned all of these

documents onto the secure server. Dr. Barb Hooper, the co-investigator, myself, and our research associates are the only individuals with access to the data.

Data Analysis

Analysis of Interview and Focus Group Data

For this study, I analyzed educator interview, educator focus group, student focus group, artifact, and field note data. I did not analyze fieldwork educator and administrator interviews for this paper, because after collecting the data, I judged that they did not add new information to the data. Data collection and analysis were concurrent throughout the study and the hermeneutic cycle drove data collection. In the hermeneutic process, analysis influences future data collection and therefore, the data collection process becomes richer and more targeted as the process unfolds (Lincoln et al., 2011). After each interview or focus group, I listened to the audio recordings and made detailed memos. These memos contained what I held to be key points made by the participants, paraphrases of quotes, summaries of sessions, my interpretations, questions, future questions for later interviews, and general writing analyzing and integrating my interpretations along with those of the participants.

I completed open coding and thematic analysis of the memos of the first interviews and focus groups. Coding is the process of categorizing bits of information, in this case parts of text (Glesne, 2011). I used a qualitative software program to store transcripts, documents, and to aid in coding of the data. At this stage of analysis, I used inductive reasoning (Creswell, 2013), looking for patterns among the texts and drawing from what I had learned through other conversations and observations to construct codes and build themes by comparing, adding, deleting and rearranging codes. Some examples of the codes were resources, student learning needs, and responsive to culture and context. I created a codebook and as the study progressed, I

created and deleted codes and subcodes. I kept an audit trail of this process by writing memos consistently.

I compared the main codes of focus groups and interviews. I took the existing memos of the interviews and focus groups that I had analyzed and coded them deductively using the existing codebook. I then listened to the unanalyzed focus group and interview audio recordings and wrote analytical memos for each. I coded those memos deductively using the established codebook. This established a preliminary list of relevant main codes (Table 4). By reflecting on the data through writing memos and through conversations with the peer-debriefer, I constructed preliminary themes, which helped guide the final member checking process (Table 5).

Table 4: Examples of Preliminary Codes/Subcodes

Goal
<ul style="list-style-type: none"> • Content relevant to local context • Practitioners advocates • Competencies • Work with limited resources • Work in TT or Caribbean context
Culture
<ul style="list-style-type: none"> • Language and class • Student culture • Levels of culture • Faculty and OTs in TT all educated outside of TT and the Caribbean • SDA • Race/ethnicity
Context
<ul style="list-style-type: none"> • Lack of resources • Lack of local data and information • Profession is new • Faculty and • OTs in TT educated outside of Caribbean • Lack of OTs

Need

- Balance learning foundations of OT with what will work in this context
- Interventions taught and resources used must be tailored to this culture
- Critical thinkers
- Advocates
- Professional advocates
- Research

Strategy

- Curricular threads
- Service learning
- Fieldwork
- Instructional processes
- Linking instructional processes
- Discussion

*Examples taken from memos dated 8/8/19-2018

Table 5: Preliminary Themes from Memo Dated 8/19/2018

-
- 1) Contextual realities in Trinidad and Tobago drive the programs' learning goals for its students (competence, advocacy, and work with limited resources).
 - 2) There are multiple levels of culture in which the USC department is situated and which influences the program.
 - 3) A main goal of the faculty is to attain and maintain a balance between educating students to a high international standard (the "core" OT elements) and being able to apply it in Trinidad and Tobago and the Caribbean.
 - 4) The approaches of the faculty appear to be in line with what students expect although the faculty don't see it that way.
 - 5) The program uses linking strategies at the program and course level to situate the program in the local culture and context.
-

After I had received and reviewed all of the transcripts of the interviews and focus groups, I again went through all of the memos and created a master list of major codes (Table 6). I used these as a priori codes for coding of all of the transcripts. These codes were not static and through writing memos, constant exploration of transcripts, and writing of this manuscript, I minimized some codes and themes and clarified others. Through this process, I constructed the final themes of (a) responding to culture and context, (b) reflecting culture and context, (c) local cultural and contextual factors, (d) local learning needs, and (e) localizing strategies.

Table 6: Examples of Major Codes from Memo Dated 11/6/2018

Advocacy	Explicit
Resources	Implicit
Contextual Factors	Intentional
Student Learning Needs	Characteristics of a situated curriculum
Goals/Outcomes	Limiting factor
Localizing Strategies	Facilitating factor
Teaching Approaches	Need to link culture and context
Reflecting to	Teaching approach aligned with context
Responding to	Faculty background

Member Checking as Analysis

In this study, member checking was as integral to my analysis as it was as a measure of quality and authenticity. As a part of the first member checking, I held one focus group with the educators, one with the first year students and one with the second year students. Member checking helps ensure that the researcher understands and includes all participants' perspectives and facilitates a deeper analysis of the data (Lincoln & Guba, 2013; Morse, 2018). To this end, I used the NVivo qualitative software (QSR International, 2018) to produce diagrams to display the codes I had constructed. I projected the diagrams onto a whiteboard and marked the elements the participants thought were missing or not necessary. In addition, participants and I created original diagrams attempting to explain the process by which culture and context influenced the MSOT program and how the program endeavored to situate itself within that culture and context. This participatory aspect of the member checking process allowed me to improve my understanding of how the educators and students experienced their program as situated in their context. Informal review of the audio recordings of the member checking focus groups helped me prepare for upcoming focus groups with students, ongoing classroom observations, and interviews with fieldwork educators, and administrators.

Analysis of Field Notes and Curricular Artifacts

I analyzed the field notes and curricular artifacts to answer specific questions raised during the interviews, focus groups, and observations. I also used field notes and curricular artifacts to triangulate the data with the interview and focus group data. Due to the volume of data, I was not able to inductively code the entire artifact and field note data for this paper. I thematically analyzed my field notes initially looking specifically for data supporting or negating the preliminary themes and preliminary codes. Memo writing generated questions for further probing, questions, and analysis. For triangulation of data, I also used deductive coding to answer specific analytic questions. I used the list of major codes a priori to code for localizing strategies educators used to connect learning experiences to the local culture and context of Trinidad and Tobago. For analysis of curricular artifacts, I analyzed syllabi by coding for the type of resources educators used.

Methodological Integrity

There are many different conceptualizations and opinions of how to maintain quality in qualitative research. In this study, I draw from Guba and Lincoln's concepts of fairness and ontological and educative authenticity (Guba & Lincoln, 1989; Lincoln & Guba, 2013; Lincoln et al., 2011) and as well as verification strategies described by Morse (2018). The principle of fairness acknowledges that there will be many different constructions and perceptions in any study, and therefore it is important to take into account the different perspectives of those involved (Lincoln & Guba, 1986; Lincoln & Guba, 2013). In this study, I strove for fairness through transparent informed consent procedures, member checking, and use of a peer debriefer. Member checking focus groups occurred twice during the study allowing for clarification of perspectives and further analysis to occur with the participants. My advisor and co-investigator

on the study, Dr. Barb Hooper acted as a peer debriefer throughout the study providing guidance on the study design, data collection, and analysis. She provided insight regarding data coding and analysis throughout the study.

Ontological authenticity indicates that the researcher and participant have undergone positive change in their perceptions regarding the topic of interest (Guba & Lincoln, 1989; Lincoln & Guba, 2013). Similarly, educative authenticity demonstrates that participants and the researcher have become more understanding about the views of others. To facilitate ontological and educative authenticity, I made my views about the influence of culture and context on education clear, while being open to new ideas. I worked to establish a trusting relationship with participants, which would allow conversations to be open and authentic and allow participants' to share their perspectives freely. Follow-up and repeat focus groups and member checking allowed participants' and my perspectives to change as we learned together how the USC MSOT program situated its curriculum in the local culture and context.

I maintained an audit trail throughout the study. An audit trail is a detailed account of the researcher's thought process during the study. The audit trail records the decision-making process regarding issues such as sampling and coding, and it tracks how the researcher constructed new conceptual understandings of the phenomenon (Morse, 2018); it is another check on rigor because it can be used to verify how interpretive and research decisions were made. I recorded my decision- making process throughout the study including decisions regarding coding, construction of themes, and decisions regarding which observations, interviews, and focus groups to conduct within my memos, thus creating an audit trail.

CHAPTER 4: FINDINGS

The educators of the Masters in Occupational Therapy program at the University of the Southern Caribbean designed the curriculum to empower students with knowledge of the profession that meets international standards while preparing them to be effective practitioners within the Caribbean. While the educators wanted to prepare students to work anywhere in the Caribbean, the education program was located in Trinidad and Tobago and therefore, educators designed the program to meet the needs of that double-island country. Educators' and students' responses as well as observations and analysis of curricular documents indicated that educators used two broad strategies to situate the curriculum within the culture and context of Trinidad and Tobago and the Caribbean.

First, educators used specific strategies to *respond* to existing needs, conditions, and challenges in the region. Educators used these responsive strategies to prepare future therapists to address the contextual and cultural realities of Trinidad and Tobago and the Caribbean. For example, educators created case studies that represented the living situations and common health conditions found in Trinidad and Tobago so that students could apply the content they learned to their specific situations. Second, educators used strategies that *reflected* the cultural and contextual qualities of the community in which the curriculum existed. For example, one educator at USC intentionally reflected the program's location by using the same language as the surrounding area. Educators more frequently discussed responding to the daily demands and situations of life in Trinidad and Tobago to help students connect what they were learning to the realities of the Caribbean.

In this section, I explore the strategies educators used to create an occupational therapy curriculum that met the needs of Trinidad and Tobago and the Caribbean. Using the students' and educators' words, I will present the strategies the educators used to address local cultural and contextual factors and local learning needs. I will then discuss the degrees to which the USC MSOT curriculum reflected the local culture and context.

Responding to the Culture and Context of Trinidad and Tobago and the Caribbean

The educators of the USC MSOT program most often used strategies to respond to the specific situations within Trinidad and Tobago and the resulting needs of the students. In other words, educators designed curricular strategies and teaching processes that would help students apply what they were learning about occupational therapy practice to the culture and context of Trinidad and Tobago and the Caribbean. I will now describe each of the specific local contextual factors of Trinidad and Tobago and the Caribbean that the educators addressed through responsive strategies.

Educators used Localizing Strategies to Address Local Cultural and Contextual Factors and Local Learning Needs

Faculty of the USC MSOT program used course-level, program-level, and informal strategies to respond to the local culture and context of Trinidad and Tobago and the Caribbean. The faculty addressed needs that are typical of most occupational therapy programs such as learning particular content such as anatomy, activity analysis, and the history of occupational therapy; however, they also addressed learning needs that were specific to Trinidad and Tobago and the Caribbean. Six *local cultural and contextual factors* led faculty members to identify and address specific local learning needs related to those contextual elements. Local cultural and contextual factors are situational factors present in Trinidad and Tobago and the Caribbean that

will influence students' learning and future practice. *Local learning needs* are the skills or abilities the students need to address the local contextual factors.

Member checking sessions were especially helpful in analyzing data with the students and educators to identify the contextual factors and student learning needs that they prioritized. Through interviews, focus groups, classroom observation, and review of curricular documents, I identified the following local cultural and contextual factors and local learning needs:

- Local cultural and contextual factor: Curricular resources such as models, theories, texts, and assessments were developed outside of Trinidad and Tobago and the Caribbean and therefore may represent the cultural assumptions, values, beliefs, and contexts of those places and may not be applicable to the Caribbean.

Local learning need: Students need to learn to apply those resources within the culture and context of Trinidad and Tobago and the Caribbean.

- Local cultural and contextual factor: Occupational therapy is new and relatively unknown in Trinidad and Tobago and the Caribbean.

Local learning need: Students need to advocate for the profession and potential clients.

- Local cultural and contextual factor: Resources available in Trinidad and Tobago and the Caribbean are limited and unique to that region.

Local learning need: Students need to learn to innovate and work within resource-limited contexts.

- Local cultural and contextual factor: There is a limited number of occupational therapists in Trinidad and Tobago and the Caribbean.

Local learning need: Students need to learn critical thinking skills to make decisions where there is little or no support.

- Local cultural and contextual factor: Local data and research on local health issues are limited.

Local learning need: Students must learn to find, consume, and produce research relevant to Trinidad and Tobago and the Caribbean.

- Local cultural and contextual factor: The occupational therapy profession and USC MSOT program represent a complex and diverse cross-section of Caribbean culture.

Local learning need: Students need to learn to operate within those various cultures as future practitioners.

To address each of the learning needs, faculty used program-level and course-level *localizing strategies* to situate the USC MSOT curriculum within its local context. Localizing strategies were processes, activities, and curricular approaches that make content, curricular resources, and student experience relevant to the culture and context of Trinidad and Tobago and the Caribbean. *Program-level localizing strategies* were processes and activities such as curricular threads and program requirements that facilitated the connection between what the students learned and the realities of Trinidad and Tobago and the Caribbean. *Course-level localizing strategies* were instructional processes, activities, and approaches such as modifying case studies that faculty used to link content, topics, and student experience to the local culture and context. Using localizing strategies was especially crucial when using external resources that represented contexts and cultures of other places.

Using External Curricular Resources in a Situated Curriculum

Achieving the balance between educating students for international standards and the context of Trinidad and Tobago and the Caribbean was complicated by the fact that most resources such as textbooks, articles, models, and assessment tools used in the program were created in contexts outside of Trinidad and Tobago and the Caribbean. The educators and program director of the USC MSOT program strove to design a curriculum that created highly qualified occupational therapists who are prepared to practice in Trinidad and Tobago and the Caribbean and internationally. In this section, I will identify educator participants with (ed.) after their names and student participants (st.) after their names. Educators designed the overall and individual course curricula to “prepare [students] to meet international universal standards.... But we also want them to be able to have the skills to fine tune their assessments and their

interventions down to the particular . . . living situations of the people that they will be meeting in the Caribbean” (Renee (ed.)). One educator, Amelia, illustrated the challenges the educators had in providing a local perspective to students when using external curricular resources:

It probably is easier to a certain extent to probably get the foreign perspectives since the textbooks are foreign, the materials would be based on a foreign culture etc. So that’s probably easier. It probably takes a little more effort to bring in the local context or to bring in the cultural context into the classes or into the outline since the - everything else comes from some other sources.

Tables 7, 8, and 9 list the required textbooks, assessments taught, and practice and concept models taught in the program. While these resources only represent the required textbooks, assessments, and models that educators listed in syllabi or that I noted in my field notes while observing classes, all of these resources were produced outside of the Caribbean and mostly are from the United States and Canada. One textbook used in the curriculum, Ageing in the Caribbean (Rawlins & Alea, 2014) represented a Caribbean perspective, and it was listed as a supplemental text.

Table 7: Required Textbooks of the USC MSOT Program Published Outside Trinidad and Tobago

Clinical and Professional Reasoning in Occupational Therapy (B. A. B. Schell & Schell, 2008)
Conceptual Foundations of Occupational Therapy Practice (Kielhofner, 2009)
Conditions in Occupational Therapy: Effect on Occupational Performance (Atchison & Dirette, 2011)
Developing Occupation-Centered Programs with the Community (3 rd Edition) (Fazio, 2017)
Enabling Occupation II: Advancing an Occupational Therapy Vision for Health, Well-Being & Justice through Occupation (Townsend & Polatajko, 2007)
Occupational Therapies without Borders: Integrating Justice with Practice (Sakellariou & Pollard, 2017)
Occupational Therapy for Physical Dysfunction (Radomski & Latham, 2014)

Occupational Therapy with Aging Adults (Barney & Perkinson, 2016)

Quick Reference Neuroscience for Rehabilitation Professionals: The Essential Neurologic Principals Underlying Rehabilitation Practice (3rd Edition) (Gutman, 2017)

Willard & Spackman's Occupational Therapy (12th Ed.) (B. A. Schell, Gillen, Scaffa, & Cohn, 2013)

Table 8: Assessments Published Outside Trinidad and Tobago Taught in the USC MSOT Program

Activity Card Sort (Baum & Edward, 2008)	Mini Nutritional Assessment (Nestle Nutrition Institute, 2019)
Assessment of Work Performance (Sandqvist, Törnquist, & Henriksson, 2006)	Model of Human Occupation Screening Tool (Parkinson, Forsyth, & Kielhofner, 2006)
Barthel Index (Mahoney & Barthel, 1965)	Montreal Cognitive Assessment (MoCa)(Nasreddine et al., 2005)
Bruininks-Oseretsky Test of Motor Performance (Bruininks & Bruininks, 2005)	Peabody Developmental Motors Scales, 2 nd Edition (Folio & Fewell, 2000)
Canadian Occupational Performance Measure (Carswell et al., 2004)	Pediatric Evaluation of Disability Inventory (PEDI) (Haley, Coster, Ludlow, Haltiwanger, & Andrellos, 1992)
Edinburgh Feeding Evaluation in Dementia Questionnaire (EdFed-Q) (Stockdell & Amella, 2008)	Purdue Peg Board (Lafayette Instrument Company, 2015)
Functional Independence Measure (FIM) (Uniform Data System for Medical Rehabilitation, 2014)	Sensory Processing Measure (Parham & Ecker, 2007)
Kohlman Evaluation of Living Skills (KELS) (Kohlman Thomson, 2016)	Sensory Profile (Dunn, 1999)
Mini Eating Observation Form (Westergren, Lindholm, Mattsson, & Ulander, 2009)	St. Louis University Mental Exam (SLUMS) (Morley & Tumosa, 2002)
Mini Mental State Examination (Folstein, Folstein, & McHugh, 1975)	WeeFIM (Uniform Data System for Medical Rehabilitation, 1998)

Table 9: Practice and Concept Models Published Outside of Trinidad and Tobago Taught in the USC MSOT Program

Occupational Therapy Practice Framework: Domain and Process (3 rd Ed.) (American Occupational Therapy Association, 2014)
Canadian Model of Client Centered Enablement (Townsend & Polatajko, 2013)
Canadian Model of Occupational Performance and Engagement (Townsend & Polatajko, 2013)
Canadian Model of Occupational Performance (Canadian Association of Occupational Therapists, 1997)
Canadian Practice Process Framework (Craik, Davis, & Polatajko, 2007)
Ecology of Human Performance (Dunn et al., 1994)
Functional Group Model (Schwartzberg, Howe, & Barnes, 1982)
Intentional Relationship Model (Taylor, 2008)
Model of Human Occupation (Kielhofner, 2008)
Occupational Adaptation (Schkade & Schultz, 1992)
The Person-Environment-Occupation-Performance (PEOP) Model (Baum, Christiansen, & Bass, 2015)
The Person-Environment-Occupation Model: A Transactive Approach to Occupational Performance (Law et al., 1996)

Educators used various *course-level localizing strategies*, to link external resources to Trinidad and Tobago and the Caribbean. For example, when describing finding data and information for her health conditions class, Anna (ed.) described how “everything is US - US, Canada, or UK. Right? And it can be really difficult without the research [local statistics and data].” Therefore, she and other faculty members looked for local research and statistics to provide students with information relevant to the issues facing people in the region. Assessments are often from other countries and may have items that do not align with the local context. Monique (st.) explained that regarding assessments and texts from other places: “I wouldn’t say it impacts learning. I would say it impacts practice because these assessments were not tested on people in Trinidad or anywhere like Trinidad.” Therefore, students learn to modify the assessments by adjusting the verbal instructions or modifying or deleting test items.

Students in the USC MSOT program appeared to feel that using external curricular resources did not have a negative influence on their learning. While faculty noted that there are some negative implications of having resources from other places, some faculty and students also explained that using resources from other places also “introduces us to what it can be like here and kind of provides a little bit of incentive or motivation to reach to that stage” (Brittney (ed.)). Students recognized that textbooks were obviously from outside of Trinidad and Tobago and the Caribbean. However, Patricia expressed the thoughts of other students when saying, “To me, I think it’s [the text is] relatable. So even though it’s in a different context it really wouldn’t be like ‘ok, you know, I really can’t get this’ - It’s all human, so to me it’s all relatable.” Two students related how they feel when reading material from other contexts:

Natalie (st.): It's not really a problem, but as Monique (st.) was saying, you just have to try to - . . . Bring it back to your own culture.

Monique (st.): Mmmhmm. Take what you need and leave the rest.

Natalie (st.): Take what you need, leave the rest.

This dialogue exemplifies how students sometimes took it upon themselves to decide what was applicable to their context and what was not when using sources from other countries. Students may miss nuances of content when they decide what content is relevant to their context and “leave the rest.” Educators may be able to make the contextual relevance or irrelevance of content explicit and thus facilitate students to make decisions regarding what information to attend to and what to discard. While most students appeared to feel that they could relate to texts even when they represented other contexts, the students in the USC MSOT program represented varied educational backgrounds. Some students received their educations entirely in Trinidad and Tobago or the Caribbean while others spent significant amounts of time outside of the Caribbean

and therefore may relate more readily to the international contexts presented in the texts and articles.

Preparing Students to Advocate for an Emerging Profession

One primary local contextual factor of Trinidad and Tobago and the Caribbean is that occupational therapy is an emerging profession. Therefore students must learn to “advocate for the profession because our country is not a country that accepts and understands OT [occupational therapy]” (Vanessa (ed.)). Student 12 captured the importance of advocacy voiced by educators and students when she said, “I think the program is designed to more or less have us advocate a lot to try to get people to be aware.” Renee (ed.) defined professional advocacy as the ability to “identify needs, gaps, inequities, disparities . . . and for students to be able to speak about those things in an evidence based way. And be – and to be able to propose – equitable solutions that are occupation-centered.” Educators and students identified advocacy as both working on behalf of potential clients and client groups as well as advocating for the profession in general, which would benefit the people of Trinidad and Tobago and the Caribbean. Faculty also used localizing strategies at the program-level and course-level to develop students’ advocacy skills and thus promote awareness of occupational therapy in Trinidad and Tobago and the Caribbean.

At the program-level, educators developed opportunities for students to experience the need for advocacy as well as the opportunity to practice advocating for the profession and clients. Educators facilitated learning advocacy through the program-level localizing strategies of (a) developing a service-learning component to the curriculum and (b) requiring and encouraging involvement in community health and educational awareness activities. The USC MSOT program director and faculty designed the curriculum to include a service-learning program that

begins in the students' second semester and continues throughout the curriculum. The service-learning program placed students at sites such as homes for the elderly, schools, and organizations that serve people with autism that can benefit from occupational therapists but where there is none.

And so the students get an opportunity to really identify clearly what the risks are, the occupational risks for people in the areas where there's no OTs where there should be.

And they get to practice through the eight semesters of the service learning stream . . .

(Renee (ed.))

At the end of the curriculum, students collaborated with their service learning partners to complete a needs assessment and design and run an occupation-based program in the community. Stacey (st.) summarized the link between service learning and advocacy:

I think advocacy ties in well with service learning because when we listen to all of our different presentations and some of the in- occupational injustices - that we have seen it just ties it. Like you see why you need to advocate, because these are the things that can happen. And these are the things that are happening. How are you going to be a part of the solution?

Students in both cohorts identified community involvement activities promoted by the department as major ways in which the curriculum facilitated the development of advocacy skills and thereby addressed the lack of awareness of occupational therapy in the country and the Caribbean as a whole. Amelia (ed.), however, stated in the first educator focus group that, "I'm not sure how much experience this program will give them in terms of advocating for themselves or advocating for resources, and I think that's a key skill that they will probably need." However, students indicated that being involved in community awareness events sponsored by the Trinidad

and Tobago Occupational Therapy Association (TTOTA), which was encouraged by the program, facilitated their advocacy skills. Students were able to attend several events through the department and associated with TTOTA. Students paired with members of TTOTA to run occupational therapy groups in a rural community in Trinidad. Patricia described the experience:

It's really beautiful. And people up there [in the rural community] has never heard about occupational therapy. I did the first leg of Paramin, which was older adults . . . And then they did not know anything about occupational therapy. So it's actually taking occupational therapy from the cities and carrying it into the country sides.

As a program-wide localizing strategy, service learning allowed students to experience providing occupational therapy in communities where the people were not familiar with the profession. Students also participated in falls-prevention programs in association with TTOTA and the Physical Therapy Association of Trinidad and Tobago. These programs occurred in local malls and other community locations where they practiced their ability to speak about occupational therapy while providing a helpful service.

Amelia's (ed.) perspective about the student's preparation to be advocates for the profession appeared to change during the study process and as a result of the students' involvement with TTOTA. In a later focus group, Amelia (ed.) stated:

I think through the efforts of the TTOTA and that relationship - and just immersing themselves into a live experience ... I think that has given them a better sense of confidence that they can do it in real life, in the real world. I think I've seen growth in the classes so far, from where they started 'til now. So I know that the program is doing its job, in a sense of developing that sense of that I, I am an advocate.

This perspective that the students' role as advocate has grown is supported by Renee's (ed.) view that "I do see them becoming confident in the skill set of identifying discrepancies in equitable access to healthcare and to occupational therapy, identifying those things calmly, and, and also seeing opportunities, and grabbing opportunities to be of service." Faculty members all valued advocacy in addressing the need to promote the profession as well as the needs of potential clients.

As another program-level localizing strategy, the faculty members also invited students to speak about their experience as students at information sessions, which the educators saw as a way of advocating for the program. Information sessions were opportunities for prospective occupational therapy students to learn about the program from faculty, students, and local occupational therapists. These experiences in the community allowed students to develop their advocacy skills in order to address the contextual reality that people in Trinidad and Tobago are not familiar with occupational therapy.

While many students and educators identified program-level strategies that educators used to promote advocacy and address the lack of recognition of occupational therapy in the country and region, there were other strategies that were implicit in promoting advocacy throughout the curriculum. Fieldwork educators stressed advocacy in field work placements, promoted advocacy through the compassionate practitioner curricular thread, and created a professional development course that targeted communication skills, which students would need as they became advocates for the profession.

Educators in the USC MSOT program also used localizing strategies at the course-level to address the fact that occupational therapy is not well-developed or recognized in the

Caribbean. Educators used class discussion, lecture, and questions to stress the importance of advocacy as well as facilitate the development of the students' advocacy skills.

In all our classes, I think in all of our classes - doesn't matter what we discuss, we look for the gaps, the things that are missing, and we try to see how we can sort of bridge the gap as OTs. And I think that's one way advocacy is promoted. (Giselle (st.))

Amelia (ed.) perceived advocacy as a skill that students can develop and use in professional practice.

I think if you can advocate for yourself while you're a student, for the things you want in your program, it helps you to be able to advocate for other patients and clients in your job later on . . . And if you aren't able to practice your voice and use it, then it's hard to do it when you're working with doctors who think they're better trained than you, and righter than you, and who in the world are you, where do you come from? But you have to have developed that skill while you're a student - in the classroom, by one, answering questions, responding to questions, just getting your voice out. When you're comfortable with your voice, it's easier to translate that advocating for other people. So I stress advocating for yourself.

Here, Amelia (ed.) promoted advocacy in her students through questions, requiring them to practice sharing their views.

One educator addressed advocacy through in-class assignments by raising students' awareness of need in Trinidad and Tobago. Students Krista and Denise described an assignment that required them to apply the concept of occupational justice to their local communities:

We had in one or two assignments where we had to find a local situation or story and had, we - that was last semester, yes, find a local article or story and describe like, why it - the injustice. We had to find an example of -- occupational injustice. (Krista (st.))

This assignment linked the concept of occupational justice to local events while increasing students' awareness of local need. Students felt that by learning about injustices in their country, they were better able to advocate for those who needed their services.

In-class presentations were common requirements in many courses in the curriculum. These formal or informal assignments required students to tie their topic to the culture and context of Trinidad and Tobago and often to deliver an oral presentation in front of peers, faculty, and sometimes professionals from the community. These presentations facilitated the students' development of skills that they needed to speak publicly and to advocate for the profession in Trinidad and Tobago.

And I think Melissa [st.] was asking me if she could just write it or if we have to speak.

And I was telling her no, speaking is part of what you will do I feel like it's something that for teaching the OT's it needs to be engrained that I -- one day you might have to go on the radio, you might have to go on TV, you might have to speak in front a class, a school, a career day. 'Cause all of us [occupational therapists in Trinidad and Tobago] have done it and we've had to do it--and for the students coming up it will be no different because we are not getting where we need to go anytime soon. (Christina (ed.))

Christina (ed.) explained that students needed to hone their public speaking skills, as they would often need to speak on behalf of the profession in order to improve the status of occupational therapy in the profession.

Preparing Students to Work with Unique and Limited Resources

One of the contextual factors influencing the USC MSOT program and the practice of occupational therapy in Trinidad and Tobago is the limited and unique resources available for therapy in the region. Educators want students to know “everything we’re supposed to know in OT practice” but because “everything isn’t always ideal out there, then you pair that with the adapting to limited resources.” In this comment, Patricia (st.), highlighted the balance educators were trying to reach between exposing students to all of the available resources used in international practice and the resources available in the Caribbean. Renee (ed.) stated that:

We’d want them to know what are the - tools that are available in the ideal - if you had access to all the gadgets and OT adaptive equipment that money could buy what’s available. But if you didn’t, how would you make it or how would you find it locally - using what’s available locally?

Anna (ed.) clearly ties the lack of resources available to practice:

And so if I’m a therapist that - I go out and I say, ok, you need to use all of these adaptive devices and you need to do all of these things and then I’m not aware that these things aren’t available here locally, the infrastructure doesn’t exist. Right? - They may not have the funding - I’m sending them out to be a failure I’m thinking I’m doing a good job ‘cause I did everything by the book, but in reality it’s not gonna translate for that person.

So for me, I am personally glad that -- we tried to keep that in mind in our program.

Using resources that are locally available facilitates future therapists to practice within the contextual constraints of Trinidad and Tobago. In the quote above, Anna (ed.) also demonstrates that doing “everything by the book” may not work because of the contextual reality of working in Trinidad and Tobago and the Caribbean with different and limited resources.

Educators addressed the limited resources through course-level and program-level localizing strategies. At the program-level, using the same strategy that addressed the need for advocacy, the director of the program designed service learning to address limited resources. By taking part in the day-to-day realities of typical education and healthcare sites in Trinidad and Tobago, the students experienced the resources that would be available to them in practice.

At the course level, educators used assignments and case studies as localizing strategies to address the lack of resources in Trinidad and Tobago and the Caribbean. Brittney (ed.) described an in-class activity she assigned to students in their pediatrics class. She required the students to “create a fine motor tool using everyday items ... because those are things we just find in everybody's home today.” Additionally, Brittney (ed.) had students write recommendations for parents that could implement locally. She described the goal of teaching the students “interventions that are culturally possible.” She went on to describe that

You want this fantastic intervention but sometimes, we may not have the facilities for that. We may not have the community centers, we may not have . . . the half day like day care programs - those stuff that we don't have. So just letting them know, that, you know, yes this does exist, but in terms of right now, or how we have to treat with our patients is offered them something that can be effective within their specific context. (Brittney (ed.))

Brittney (ed.) expands resources to include the institutional and healthcare resources that authors described in the texts and papers that the students read but may not be available in Trinidad and Tobago and the Caribbean.

Educators and students frequently identified case studies as a way in which educators localized content to Trinidad and Tobago and the Caribbean. Denise (st.) remembered when

We got the case studies from Vanessa (ed.) and we had to come up with a therapy for her patient - he had a damaged thumb or something like that and we had to come up with a technique and stuff that he will be able to use here. In Trinidad.

Educators included case studies requiring students to use local materials and resources informally and formally. Students appeared to recognize the skill they were developing when creating interventions for these case studies. Denise (st.) recalled that during an examination she was:

Looking at the materials that I had to work with, you know, in all limited resources, how can I transfer what I'm doing in clinic to advising the parents . . . me, for me I have to go through it step by step in my head. Okay, so we, a- parents might not be able to use the Theraputty because Theraputty is expensive. How can I, what can I use in place of the Theraputty?

This example illustrates that this student began to integrate the knowledge she was learning in class such as possible therapeutic techniques to use with children with certain occupational needs with the lack of resources in her community.

It is important to note that while I was able to identify, and many students and educators were able to discuss, how the program faculty addressed the lack of resources in the community, one student felt that students could be better prepared to work with fewer resources. When asked how the educators could improve the contextual relevancy of the curriculum, Stacey (st.) stated:

Learning how to work with the resources that you have. You may not have the, fancy equipment for interventions as if you're in a more developed country, but -- improvise yeah. I think it would be nice if we get more of that. How to improvise, when you don't have equipment. (--*I inaudible*) 'cause I believe if you go to Haiti or even if you go to

Dominica now - How do you use the resources that they have to still be able to get the proper intervention that they need?

This opposing view may indicate that while the USC MSOT faculty addressed the lack of resources in the Caribbean, this goal may not be evident to all students, allowing some to miss the fact that they are learning to apply intervention content with contextually-available resources.

Preparing Students to Work with Limited Support

At the time of this study, there were approximately 25 occupational therapists practicing in Trinidad and Tobago (Trinidad and Tobago Occupational Therapy Association, 2018).

Students, therefore, would likely be practicing alone once they graduated from the program.

I think the program is also attempting to prepare us to work in places where there won't be other OTs . . . because that is likely going to be our challenge When we get out there, we'll be alone and place that never had an OT. (laughs) That has no structures and (chuckles) You might need to like start from scratch. (Monique (st.))

At the program-level, the implementation of service learning across the curriculum served as a localizing strategy to prepare students to work independently. Program faculty purposefully chose the service learning sites to be places that would benefit from but were lacking an occupational therapist.

Because for us, they're going to need to be able to work with people outside of OT much more than . . . OTs in places where there's a team of OTs doing everything that the OT department does. They will be the one OT . . . and so they'll have to practice explaining what they do. What is an OT, what is the OT's role here? So in service learning we've tweaked it so that they have to do that a lot. (Renee (ed.))

Students also recognized the role of service learning in preparing them to practice in environments where there would be little support.

[The reason for having a lot of service learning had to do with] the fact that we do not have a lot of OTs and we may have to work in places that has never had one and meaning OTs, so probably putting us in places to give us that insight from early. ...So that you're not going to be just dumped in a place and not know where to even begin. (Natalie (st.))

Service-learning appeared to be the primary way that students and faculty recognized that the program faculty addressed the need for students to be able to work alone once they graduated. Faculty members also mentioned the importance of developing students' critical thinking skills to allow them to work and make decisions alone. Like most occupational therapy educators, the USC MSOT faculty wanted to develop the students' critical thinking skills, because it is necessary for successful occupational therapy practice. In the context of Trinidad and Tobago and the Caribbean, however, it may be more important that occupational therapists be critical thinkers, as they will need to make decisions independently. Anna (ed.) recounted that purposefully designing exam questions to facilitate critical thinking and to help the students bring "in different pieces of the puzzle as they go along, hopefully building on what other, they're learning in other classes as well. Because - And, and sometimes leaving pieces out." (Anna (ed.)). While critical thinking skills were important to be occupational therapists in general, the lack of occupational therapists and available mentors made this skill more important for future Caribbean practitioners.

Preparing Students to Work with Limited Local Data and Research

Faculty often commented on the challenges of educating students due to a lack of local research and local statistics. Creating a curriculum that met the needs of the local context was

challenging because the textbooks and readings that the students used presented data and research about contexts other than the Caribbean. Educators approached the lack of local research and statistics in two ways. First, at the course-level, they integrated local research and statistics into class lectures and assignments. Second, at the program-level, they required students to complete original, local research.

To fill in the gap in local research and statistics left by the textbooks used in the curriculum, educators worked to bring in local information. Denise (st.) remembered that: “Amelia (ed.) actually gets statistics from the [statistics] office in Trinidad and ... she would link whatever we're learning from the textbook back to home.” Some of the educators described their efforts in filling in the research and statistical gap.

Because the text that they have - has a lot of statistics, but it's all US or . . . the other classes they get a lot of Canadian - information as well. So, for this class I try to get as much local as I can. ... So I'll usually give them that in the notes and then they have access to the foreign as well in their text. (Anna (ed.))

Anna (ed.) went on to share an example of the power of adding data from local sources in a class where they were discussing nutrition in elderly people. She recalled the session:

... Because food, for our context, Caribbean, Trinidad especially, food is in everything. We don't exist without food. So . . . that discussion was fun because they were able to tie in some of the things like when we were talking about the statistics and they saw the prevalence of some of these diseases between the different islands, even in the Caribbean because there was one study I was able to get some info like that. And you know, they saw how the cost associated with the diet in those areas was just unsustainable. It kinda

made a link for them, like “oh yeah, okay.” So we can see how this affects health care delivery even though it’s a simple thing like diet. (Anna (ed.))

Anna (ed.) used local statistics to fill in the gap left by the texts and articles the students read. She added, “So that’s why I think the statistics for that class is really good to have on hand ‘cause sometimes they may think it’s one way and when they see the statistics, they realize it’s not exactly what I had thought before.” In this way, the educator helps the students paint a more contextually relevant picture of their community while addressing the lack of local data in their readings.

At the program-level, the curriculum designers included a research requirement, which addressed the lack of local research. Anna (ed.) remarked that:

With regards to the research, I think the fact that the students are not just being asked to do a lit review alone, like some of them are involved in some real life research that’s gonna be impacting real life situations.

Students, therefore are directly involved in research that will increase the amount of local research relating to local occupational therapy. When asked how students apply research to the local context, Stacey (st.) replied:

I guess that’s what our research projects will help us to do, because it’s locally based and I’m wondering if they do not expect us after we have graduated to continue to add to the literature, and then continue to add to the statistics.

Educators did, in fact, want students to not only learn research skills but also to eventually be able to produce original research for and by Caribbean occupational therapists. Amelia (ed.) described her intention in designing the research requirements:

I was very focused on their being able to actually have research skills, being able to interview, being able to actually collect the data that they may need and throughout the end of the program I guess they will then be able to get to the point where they could present that information and actually write an article, etc. So that will be helpful in terms of being able to generate some findings for ourselves.

The lack of local research and data skewed the data that the students received from textbooks and therefore, did not represent the situation of Trinidad and Tobago and the Caribbean. Educators' efforts to include local data and research as well as their requirements that students include local data in assignments and complete original, local research localized the curriculum in the local context.

Preparing Students to Work within a Culturally Complex Society

The occupational therapists whom the USC MSOT program will graduate will need to be equipped to function as professionals within a diverse society. People of African, Indian, Middle Eastern, and European heritage make up Trinidad and Tobago. The country's history of slavery, colonialism, and immigration have created social groups of race, religion, and socioeconomic class. I will define a cultural group as a group of people sharing similar values, beliefs, and practices (Dunn et al., 1994; Schein, 2004).

Students and educators identified that students and educators are members of, and influenced by, several cultural groups. Students were a part of a student culture group, and students and educators were members of other culture groups such as religious, racial, and community-related groups. Students were also becoming part of the occupational therapy professional cultural group in Trinidad and Tobago. Students in the graduate program navigated these culture groups every day and would continue to do so as they complete the Master's

program and become practicing occupational therapists. Educators addressed this cultural complexity in one of two ways: First, educators addressed this cultural complexity as an environmental factor that students would need to understand for competent practice. Secondly, this complexity was a factor that directly and personally influenced students in their current academic roles as well as their roles as future practitioners within the occupational therapy profession.

Addressing culture as a factor influencing practice. As an environmental factor influencing practice, some educators tied in local cultural attitudes and behaviors to the content students were learning using course-level localizing strategies. Educators often simply used short comments or questions woven into lectures or discussion to explain how specific cultural beliefs or norms would impact their future practice. For example, when discussing professional communication, Vanessa (ed.) shared one experience with her students in attempt to give an example of the need to be careful of what you say. She gave them an example of a time when she was:

Speaking to a doctor and we had a great conversation. I ended the conversation saying, thank you so much for your time and if you have any questions about OT, [let me know] what we can do for you . . . and he slapped the table and got up . . . upset. So [that] was me trying to show them [the students] in our culture and our society, ego is . . . the hierarchy and the . . . abuse of authority is a pretty rampant thing in our culture . . . so just be mindful [of] the content and the type of language you use.

In this example, the educator localized the topic of professional communication by highlighting the social hierarchy that can be present in the cultural context of Trinidad and Tobago. Amelia (ed.) explained local attitudes and stigma about chronic health conditions such as diabetes, “In

this culture, people don't tell people they have it. I guess it's just part of the culture." In a later class session, Amelia (ed.) used questions and small group discussion to explore the stigma regarding mental health in Trinidad and Tobago. Discussion and informal comments facilitated students' deeper understanding about how cultural beliefs and attitudes influence local health conditions and localized the topic to the local culture.

Educators were compelled to create customized case studies, which enabled students to apply content to scenarios that embodied the cultural attitudes and beliefs that they would encounter in practice. Such localized case studies were necessary because, as Brittney (ed.) described, case studies in textbooks may represent different values and attitudes than are common in the Caribbean:

And sometimes the way that the person, like the client that they're introducing [in the textbook] - their point-of-view and their families' point-of-view on disability might be a little bit different from what we'll expect here . . . some of the attitudes that yes I - I can do everything, even though I have a disability. I would love to believe that would happen here but sometimes it's just in terms of the accessibility in general it's not."

Because cultural attitudes and other cultural factors represented in textbook case studies were different from those in the Caribbean, educators often modified existing case studies from texts or created their own case studies based on their own clinical experiences. Anna (ed.) remembered a time when she used a case study in an assignment in which students were to identify instances in which there may be problems with medication adherence. "I gave a little short scenario - wasn't a full case study - but I used things that I -- locally people would say." In one example, a client in one of the case studies said, "Oh, I get some [medication] from my neighbor." Anna (ed.) described the class discussion following this case study in which the

students said, “My grandmother does do that” or “my aunt does that all the time!” Students are then connecting the topic of medication compliance to Trinidad and Tobago by addressing prevalent cultural attitudes towards medication and personal experiences with those behaviors.

Preparing students to practice in a profession dominated by the minority. Many student and educator participants spoke about challenges that some students were facing or would face as students and as new members of the occupational therapy profession largely because they are Black. Educators and students described challenges in entering the occupational therapy profession in Trinidad and Tobago because many of the current occupational therapists and the clients that the students may see represent different racial and ethnic groups. During the interviews and focus groups, the students and educators used many different terms to describe the differences among some of the students and their future colleagues and clients including the terms race, ethnicity, and culture. While these terms have distinct technical definitions, participants appeared to use them interchangeably, and they refer to groups with shared ethnicity, skin color, and ways of speaking.

Through comments and discussions, students and educators illuminated the presence of race that influenced the students as they began to negotiate the world of professional occupational therapy in Trinidad and Tobago and the Caribbean. Stacey (st.) frankly shared that, “The first cohort, is the Black cohort and then the second cohort is more the - non-Black cohort (Stacey (st.) *chuckles*). Stacey (st.) voiced what other students and some educators had stated as their perception of the racial differences in the two classes, with the first cohort representing more of an African heritage and darker skin color. Amelia (ed.) offered an explanation of the challenges that some of the Black occupational therapy students faced as they entered a profession dominated by people that are not Black:

But - but I think also a lot of OT, occupational therapy, in this country is also situated in a - in a particular context. If you have recognized, most of the occupational therapists don't look like me [Black] and that comes with its - with issues. This is a class of nine people that look like me ..., which means they are entering a very different culture and a very different context when we enter the profession of occupational therapy.

Amelia (ed.) goes on to explain some reasons for the cultural and racial differences between the existing profession of occupational therapy in Trinidad and Tobago and the current USC MSOT students. Amelia stated that until the USC MSOT program opened, all of the practicing occupational therapists in Trinidad and Tobago had to go overseas to train as occupational therapists. Therefore, most of the people able to attend university overseas to become occupational therapists had the financial means to do so. Due to the social, racial, and economic situation in Trinidad and Tobago, people with higher financial means were more likely to be of lighter complexion. Amelia (ed.) also described the current view in the country towards skin color and race, as she saw it:

In this country as a whole we - we still think the White man's ice is colder. So how do we then perceive that these nine people [first cohort of students] would be of equal level with the other people that have probably studied abroad, that just have White, or Caucasian, or mixed, or Syrian, or Lebanese or whatever they are. That's a whole different cultural context than even the students here has - would have to deal with. And would have to process how this affects them, would have to process what meetings look like, what interactions look like, because that really is the cultural context.

Amelia (ed.) described her perception of the reality that some of the students with darker colored skin have as they enter the professional workforce due to racial biases in the country. In the

interviews and focus groups, Amelia (ed.) explained that students will have to negotiate racial and cultural differences every time, “they go to do fieldwork, the culture that they go into when they go into meetings. It's a very, very different culture.” Here, it appears that Amelia (ed.) is using culture to indicate a group of people with a distinct race, belief system, and way of doing things based on experience, values, and beliefs. Stacey (st.) also discussed perceptions of race as they engaged with local occupational therapy institutions:

But I know it came up among the first cohort especially when we went to the first [national occupational therapy] meeting, how, how was it said? We were the chocolate in the milk (-- *giggles*) and it was just so obvious that we would have changed the face of OT.

Several students saw some of the differences between the occupational therapy profession and the USC MSOT students as influenced by race, citing racial biases in the country. As a way of demonstrating the cultural barriers that the future occupational therapists may face, Giselle (st.) stated that doctors and other professionals in Trinidad and Tobago are often of Indian heritage and that it:

. . . Is always a struggle for the Negros and what not. So that might be a part of the [administrative] aspect and the politics and what not. Or it might also be similar to having access to, enough funds to go to school and what not.

While many students of the second cohort appeared to support this opinion that race was a reason that more people of African descent did not pursue higher degrees, Lynnette (st.), however, offered an alternate opinion. She countered by stating, “It doesn’t always have to be on race. It could be socioeconomic status as well. It doesn’t have to be based on race ‘cause you could have a Black rich person who has the same opportunity.” This appeared to be the perspective of few

students in the second cohort. Additionally, the actions that some educators took at the course and program levels indicated that they deemed the issue of culture as it influenced students' preparations to move into the professional occupational therapy world as real and important.

Addressing cultural complexity at the course-level. At the course-level, students' and one educator's comments revealed the inconsistency with which the program addressed student and the professional cultural differences. One educator addressed the various cultures that students would need to navigate in their professional lives. Amelia (ed.) stated that she discussed the issues of culture and race with the first cohort of students.

As being the one who's skin is probably (laughing) the close, the closest to the students, especially in the first . . . the, the current [*inaudible*] years, I have spoken to them about some of these issues and how they would relate to it. Being someone who could probably relate to their situation in the best sense of - of the word, and how they should probably address some of the concerns. What are some of the biases and how to adjust to some of those cultural ex- expectations too.

Amelia (ed.) described speaking informally to students about culture and race during class stating that she "just talked to them," but that "there is not a - it's not a written in a course outline, it's not written there, but we have discussed it." Students have also stated that there was not a formal plan in place. When referring to the issue of race and culture, Giselle (st.) remembered that, "in class I've heard it come up sometimes. Maybe lecturers would bring it up, but not to say that we *address* it, to put measures in place." She went on to say that, "All we've been told is, no don't worry about that. You all just, learn your stuff . . . Don't worry about the, difference in race. You all just need to know your work and move forward." Amelia (ed.) agreed with the student that, "it has to be recognized that there is a need for it [addressing issue of race]

so that system or some conversations - and some of the things just need a conversation or a safe space for it to happen.” While Amelia (ed.) recognized the need for a more structured way to address the racial and cultural differences, she also described specific instances in her classes where she addressed the cultural complexity of race that the students would need to navigate. Amelia (ed.) spoke about how she tried to prepare students to work in the world of occupational therapy. She described how she started her classes exactly on time in a culture where that is not always common. Amelia (ed.) said she started her classes on time:

Because you - you have to understand that this is the culture in which you’ll be working and practicing. And you have to understand that these things matter to the people that you would be hanging out with . . . So - so it’s very intentional. Yes I like to be on time and yes I like to set up and am probably like that, but - but part of that is the hidden curriculum that - that you teach students.

The relationship to time may not be directly related to race; however, Amelia (ed.) attempted to prepare students to work with clients and colleagues that may have different expectations regarding time, which is related to cultural group membership. Amelia (ed.) acknowledged the “hidden curriculum” or unseen rules that influence behavior in the academic and professional worlds. First, she acknowledged the typical behavior of arriving late and then acknowledged the expected behavior in the professional world for which she wanted the students to be prepared.

Educators Amelia and Christina used language in their classes in very different ways to address the issue of culture. Amelia (ed.) noted the different styles of speaking used in Trinidad and Tobago stating that

I think cul- culturally here too, we see people who speak a certain way from a certain class, and there are reas- there’re some reasons why I try to stress diction and

pronunciation because it matters when you get out where other people would kinda associate how you speak with what SES [socio-economic status] you come from or what village you grew up in and all of those things matter.

According to Amelia, some people in Trinidad and Tobago perceive people from different ethnic, racial, and socio-economic groups to speak differently. To Amelia (ed.), it was important that students speak with a particular pronunciation and diction because it would influence how professionals perceive students.

Addressing cultural complexity at the program-level. While some students and educators did not feel that the USC MSOT program was directly addressing the issue of culture as it affected the students, at the program-level, some educators and students cited using fieldwork educators, formal training sessions, and community-based field experiences as methods for addressing cultural differences between students and the occupational therapy profession. Renee (ed.) encouraged the clinical instructors at the fieldwork sites to, “make sure the students feel . . . this is a CI student relationship, other things that come into, like, personal factors and socio-economic background, we want to make sure that these students feel that they belong in the profession, the OT students.” Renee (ed.) acknowledged that students may feel awkward at first and that it is important that they feel included in the profession. The program educators and director also arranged for an external human resources specialist to come in and to work with some of the students in “dealing with diversity of colleagues, clients, future faculty - the - the conflicts that that might bring.” This was an attempt by the faculty to create an open and safe space for students to discuss challenges they may have as they enter the occupational therapy workforce.

Students and educators also identified various experiential outings as helping students learn about the occupational therapy culture of Trinidad and Tobago. The culture of occupational therapy in the country includes the predominant values and beliefs that drive behavior amongst the group members. During the students' time in the program, there were several instances where they were either required or encouraged to participate in community outreach projects with the national occupational therapy association or other occupational therapists. Students went with experienced occupational therapists to talk about occupational therapy in rural areas, build a house for an elderly man through Habitat for Humanity, run fall-awareness programs in public malls, and help with a local dyslexia workshop, among other awareness programs. These experiences may be common in occupational therapy education; however, these community awareness outings also allowed students to learn about the values of the Trinidad and Tobago occupational therapy community. Claudia (st.) reflected on her experiences in the community and on what she learned about occupational therapy in her country.

Claudia (st.): We realize now, this is our culture. This [culture of occupational therapy] is what we are in, this is what we signed up for. We probably didn't know it when we signed up for it, but doing it now we know this is what we signed up for.

Interviewer: Okay. So, you say, "This is our culture." What is "our culture?" What is this?

Claudia (st.): Helping those in need.

This excerpt demonstrates the evolution of students' understanding of the professional culture that they would soon be entering and that occupational therapy in Trinidad and Tobago "wasn't just all about making money." (Tanya (st.)). Amelia (ed.) acknowledged the power of teaming with the national professional association and practicing therapists:

But I think that [community engagement with practicing occupational therapists] enables them to understand, more the culture of [what] practicing OT is. What that culture looks

like, how it presents itself, what activities they may be expected to engage in, etc. That opportunity is what will enable them to understand that more than sitting in the classroom will.

Experiential opportunities with practicing occupational therapists required or encouraged by the USC MSOT educators acted as program-level localizing strategies that helped students begin to understand and become a part of the broader occupational therapy community.

Reflecting Culture and Context in the USC Curriculum

Educators as a Reflection of the Local Culture and Context

The USC MSOT educators reflected the culture and context of Trinidad and Tobago and the Caribbean to varying degrees. The USC MSOT administrators hired educators who were all from Trinidad and Tobago. These educators have a firsthand knowledge of some of the conditions that influence the Caribbean. For example, most of the educators were health care practitioners and health care consumers in Trinidad and Tobago. Therefore, they understood the health system and challenges that many people may face using the health system. Anna (ed.) highlighted that the faculty “were trained internationally so we’re aware of certain competencies but a lot of us are local. So we’re not just solely foreign trained, foreign born, foreign bred persons.” However, Amelia (ed.) pointed out that while most of the faculty are from Trinidad and Tobago, they received their university educations outside of the Caribbean, “so that means that our training may not also meet the culture and context, the needs that we are trying to pass on.” Amelia (ed.) recognized that the training of the faculty may not have prepared them for the specific situations that their students may face when practicing in the Caribbean. Therefore, the USC MSOT faculty reflected both the local context because they are from Trinidad and Tobago and the international context because they attended university abroad.

Language and Dialogue as a Reflection of the Local Culture and Context

The different uses of language in the classrooms illustrated ways in which educators reflected the local culture. Christina (ed.) remembered that she “would speak how everybody would normally speak [in Trinidad and Tobago]” in her classes allowing for a more informal environment in her class. Her language reflected the local community and context. Amelia (ed.) explained, “culturally we have a more oral tradition culturally here - So, discussion would more fit into that oral tradition that we have here.” Therefore, discussion-based methods, which are common in the USC MSOT classroom, reflected Trinidad and Tobagonian society. While reflecting local norms, educators appeared to use the strategy of discussion, subconsciously and without an explicit goal of using a teaching strategy that reflected a local tradition.

Religious Affiliation as a Reflection of Local Culture and Context

The Seventh Day Adventist (SDA) church is a part of the university and larger regional culture and context. USC is a Seventh Day Adventist (SDA) institution that required educators to incorporate faith in every class session. The USC MSOT curriculum inconsistently reflected the religious tenets of USC as guided by the SDA church. Educators and students perceived the realities of teaching and learning in a religious institution differently. Renee (ed.) explained that because the department is part of a religious institution:

Some of the teaching practices are reflective of the culture of the school. So we start class with a prayer - we may end with a prayer. We have to build in Faith and Learning from a Christian perspective into our teaching, which for me is a new thing.

Due to the particular policies of the institution, there were program-level strategies that attempted to ground the curriculum within the religious culture of USC. For example, in their syllabi, educators included institutional learning outcomes that included the integration of

“religion, culture, and scholarship” (University of the Southern Caribbean Master of Science in Occupational Therapy Program, 2016, p. 1). However, one educator didn’t realize that she was required to include faith explicitly in her courses, stating “so that's gonna change the way that I teach.” This revealed the inconsistency in which the educators applied the religious policies of the university. Students’ perspectives of the influence of religion on their learning further highlighted these inconsistencies. According to Stacey (st.), “there are more Seventh-day Adventists in the first cohort than the second.” She also pointed out that because

Most of the lecturers are not Seventh-day . . . They just come to class and they start class. So there’s not really prayer, devotion, and faith and learning practice. So I, I fear that, that [adherence to religious practice] would be lost.

Students in the second cohort corroborated the view that there may be a diminished influence of religion in the curriculum stating that they didn’t feel that it had much impact on their learning. When elements of faith such as devotions are included in classes, the occupational therapy curriculum reflected the SDA faith; however, it was not consistent across the curriculum. Educators who did not identify as part of the SDA church were less likely to incorporate faith practices into their courses.

Students and Educators Disagreed on the Degree to which Instructional Approaches Reflect the Local Context

Instructional approaches and processes can reflect the educational culture and norms of a region. Students and educators of the USC MSOT program disagreed on whether the educators’ teaching approaches reflected the local educational context. Brittney (ed.) explained that in Trinidad and Tobago, “we use very traditional teaching methods, a lecture and then students are, you know, expected to, just you know, swallow up lecture material and stuff. That’s pretty much,

it's very traditional here what I've experienced here" (Brittney (ed.)). Students, Claudia, Giselle, and Jacqui, explained that the traditional way of teaching in Trinidad and Tobago is the "chalk and talk" method:

Claudia (st.): Chalk - they will stand up and they will give you a lecture and they will talk about the thing and then they will write it up on the board and tell you, "Okay, go and do that."

Giselle (st.): Write it down.

Jacqui (st.): Copy the notes.

The educators differentiated their teaching styles and approaches from what they saw as the traditional "chalk and talk" or transmission method of the local education system in Trinidad and Tobago. The educators appeared to assume that the students in the program had all participated in education systems using the transmission method of teaching. The educators described their approaches as being informal, active, and facilitating participation. Brittney (ed.) stated that she used more discussion and application than what she thought was typical in Trinidad and Tobago. Renee (ed.) explained that her "classes are fairly interactive" and that she liked to use active processes such as role playing and active discussion. The educators also felt that although their approaches were different from the norm in Trinidad and Tobago, they were effective. Renee (ed.) stated that she knows her instructional approaches are working by gauging students' engagement as well as through "some feedback methods where I'll occasionally ask students write down the clearest thing that you learnt this unit or the most difficult thing that you didn't get." She acknowledged, however, that using more active approaches "takes a little getting used to for them [students] and . . . I think they've come to learn – how to be more prepared to participate in class - and it took longer than I expected." Educators chose methods that they thought would be successful in fulfilling the learning needs of the students although they thought those methods were not reflective of local teaching norms.

While the educators felt that they were using teaching approaches and methods that were unusual for Trinidad and Tobago, students felt that “all methods used are similar and understandable” (Krista (st.)). Krista explained that the “chalk and talk” or transmission style of learning is more common in teaching younger students in Trinidad and Tobago but not used as much at the university level. The students in the USC MSOT program represented a broad spectrum of educational experiences. Some students attended secondary school and undergraduate school in other countries and other students received all of their education in the Caribbean. Most students, however, felt that the educators’ approaches and methods were familiar. Furthermore, many of the students attended USC and felt that that they experienced active approaches before entering the master’s program. The educators did not choose approaches strictly because they would reflect the local context or because they would help respond to local cultural and contextual factors. Educators chose educational approaches that they thought would be effective in facilitating learning of the chosen content.

CHAPTER 5: DISCUSSION

The findings of this ethnographic case study demonstrate that the educators designed a program that reflected and responded to the culture and context of the Caribbean and Trinidad and Tobago. The USC MSOT program *reflected* the local culture and context by hiring local instructors and selecting some instructional processes that mirrored the local culture. The educators *responded* to the culture and context of Trinidad and Tobago and the Caribbean by using program-level and course-level localizing strategies that made student learning relevant to six categories of learning needs in the Caribbean culture and context. These localizing strategies incorporated processes that on first glance seem common in occupational therapy education, such as curricular threads, service learning, discussion, case studies, fieldwork, guest lecturers, and class presentations. However, it was the way educators used these strategies that actually reflected and responded to the six identified cultural and contextual factors and the six local learning needs of Trinidad and Tobago and the Caribbean.

Further, the educators of the USC MSOT program balanced the need to create a curriculum that embodied the values and current practice standards of the international occupational therapy profession with the specific needs, beliefs, values, and situations of Trinidad and Tobago and the Caribbean. The educators understood that to serve the local people, they had to provide occupational therapy education that responded to the cultures of the people the students would serve and respond to the situations that were common in the country and region.

In this discussion, I explain how the USC MSOT program illustrated the ways in which globalization and internationalization influence occupational therapy education worldwide.

Critical pedagogy and transformative learning theory offers helpful strategies to address the challenges posed by globalization and internationalization. I explore the implications of this study for future practice and research as well as for occupational therapy and occupational science. Finally, I will evaluate the Model of International Cross-cultural Curricula as introduced in Chapter Two in relation to the findings.

The Globalization of Education and the USC MSOT Program

Globalization is a process that links the world through the global economy, information and communication technology, the global knowledge network, and the dominant role of the English language (Schugersky, 2013). The process of globalization is evident in the USC MSOT program through the: a) international experience and education background of its educators and students, b) availability and use of external resources from other parts of the world, and c) connections to international knowledge communities. Each of these opportunities to access the global community was possible because some educators and students of the USC MSOT program had access to communication technology, adequate finances, and spoke English.

The international experiences of the USC MSOT educators and students were an example of the influence of globalization on the program and the way it impacted key curricular decisions. All of the educators in the program attended either undergraduate or graduate education in the United States or the United Kingdom. The director of the program, Renee (ed.), attended a masters and doctoral program in the United States, whose faculty supported her in developing the MSOT program curriculum. Additionally, several of the educators practiced either occupational therapy, physical therapy, or received their education at the university level outside of the Caribbean. Additionally, many of the students studied outside of Trinidad and Tobago and the Caribbean. Two of the students were international students from other Caribbean

countries and other students attended primary, secondary or undergraduate school outside of the Caribbean. Some of the educators acknowledged that while they were local educators, their American education gave them a non-Caribbean perspective on occupational therapy and healthcare. Being from Trinidad and Tobago and educated abroad, most of the educators were familiar with outside resources and contexts while simultaneously understanding the local context. This unique perspective may have made the educators more aware of the need to use localizing strategies to link external resources to Trinidad and Tobago and the Caribbean.

In this study, educators used resources such as textbooks that are commonly used in occupational therapy programs in the United States (National Board for Certification in Occupational Therapy, 2018) and around the world as well as practice models, theories, and assessments that are largely from North America because of a lack of Caribbean-specific resources (Tables 7, 8, and 9). This importation of external resources may have been possible, in part, because the USC MSOT educators were familiar with many of the resources through their previous educational and work experiences. The educators recognized that many of their external curricular resources did not represent the cultural and contextual realities of the Caribbean and therefore may have used localizing strategies to make the content relevant. Although the students recognized that there was a disconnect, at times, between the external resources and their context, the students did not feel that using external resources influenced their learning. The students may have felt that use of external resources did not influence their learning because some of the students had international experience. The globally connected economy and global technology and communications system also enabled the educators to learn about and purchase these resources.

Throughout the study, I took it for granted, and the study participants did not mention, that being English speakers allowed them access to external occupational therapy education resources that many educators in North America use. The official language of Trinidad and Tobago is English and all of the USC MSOT students spoke English, so they were able to access the external curricular resources. Many occupational therapy programs however exist in countries where students and educators speak other languages or English is a second language and therefore, students and educators may not have access to resources in their own languages.

The USC MSOT program is an example of globalization through its connection to international knowledge communities through the Seventh-Day Adventist University system and the WFOT. Adopting and conforming to the standards of the General Conference of Seventh-Day Adventists and WFOT may give the USC MSOT program one way of accessing resources and demonstrating a high level of educational quality. USC is accredited by the General Conference of Seventh-day Adventists (SDA) in the United States (University of the Southern Caribbean, 2018a). The director of the program received her doctorate training and support for developing the curriculum for the program from an affiliated SDA university in the United States. The university is therefore part of an international network of post-secondary institutions affiliated with the Conference and thereby operate by common standards, which demonstrate the interconnectivity of institutions that is made more common with globalization.

Similarly, membership in the WFOT connected the USC MSOT department to the broader international occupational therapy community. The department adhered to the WFOT's Minimum Standards for the Education of Occupational Therapists, which provided a guide for the general "knowledge, skills, and attitudes" that occupational therapists are to demonstrate (World Federation of Occupational Therapists, 2016a, p. 29). The Minimum Standards

encourage educators to customize curricula for their local context; however, the standards demonstrate the globalization of occupational therapy as the standards themselves include core tenets common throughout the profession worldwide such as the centrality of occupation and the Person-Environment-Occupation relationship. Curriculum designers and educators in every program globally are to apply these core tenets. By seeking WFOT approval for their education program, the educators of the USC MSOT program chose to apply international standards and professional concepts within the program, thereby informally connecting with the programs from different countries, contexts, and cultures, via these professional principles while applying these core tenets in locally relevant ways. The curriculum designers and educators of the USC OT program used program- and course-level strategies to ground the curriculum in the Caribbean while necessarily using resources from SDA affiliates and the WFOT to establish the program. These strategies allowed the educators to use external resources, adhere to WFOT standards, and localize their program simultaneously.

While globalization has the power to connect individuals and groups of people across great distances, it can also have a homogenizing effect (Kubow & Fossum, 2007). In the case of education, this can mean that that intellectual concepts and resources from Western and Northern countries become the preferred educational products in most places almost to the exclusion of ideas representing other contexts. Globalization may be thought to encourage flow of influence equally around the world, however, the homogenizing effect of globalization often occurs because influence flows from the more developed countries to those that are less developed and rarely occurs in the opposite direction (Samoff, 2013).

Due to globalization, the educators and students of the USC MSOT program were able to use resources such as textbooks, models, and access to other institutions and educators for

support. Through creative use of localizing strategies, educators were able to facilitate learning grounded in the culture and context of the Caribbean. Furthermore, through technology, the global flow and availability of knowledge and the movement of people around the world, globalization facilitates internationalization of programs such as the USC MSOT program. This allows students and educators to connect with other cultures directly and indirectly.

The USC MSOT Program as an Example of Internationalization

The concept of internationalization helps frame the USC MSOT program as an example of occupational therapy education as it directly and indirectly integrates intercultural experiences into its curriculum. Knight (2003) defined internationalization at the national level as “the process of integrating an international, intercultural, or global dimension into the purpose, functions or delivery of postsecondary education” (p. 2). Educational scholars have described two types of internationalization: Internationalization of the Curriculum (IoC) and Internationalization at Home (IaH). IoC is “the incorporation of international, intercultural, and/or global dimensions into the content of the curriculum as well as the learning outcomes, assessment tasks, teaching methods, and support services of a program of study” (Leask, 2015, p. 9). Internationalization at Home (IaH) is another way of exposing students to international and intercultural experiences without the expense of overseas travel and the administrative challenges through activities such as case studies and extracurricular activities (Nagarajan & McAllister, 2015). Institutions engage in internationalization for a number of reasons: from building financial resources through student fees, to expanding students’ intercultural experiences abroad, and improving education standards through international competition (Van Damme, 2001). Scholars have described internationalization as occurring in a more traditional form through study abroad programs and international study programs, specialized foreign-

language instruction and through sponsoring foreign students as well as through a “European” form of internationalization focused on the political integration of member countries of the European Union (Altbach & Knight, 2007).

Where internationalization is the integration of international and intercultural elements, an internationalized curriculum is one in which there is an intentional “focus on international and intercultural learning outcomes” (Leask, 2015, p. 10). The USC MSOT educators did not refer to the curriculum as internationalized, and in many ways, the curriculum did not demonstrate the characteristics of an internationalized curriculum. However, internationalization may be a useful lens through which to view the USC MSOT curriculum. The USC MSOT program paralleled programs that use internationalization of the curriculum in two ways. First, The USC MSOT program enrolled international students from other Caribbean countries. Second, two students were placed at international sites for their level-two fieldwork placements. Therefore, while the program may not have identified these curricular elements as internationalization, the students engaged in formal curricular activities that exposed them to other cultures and contexts.

Perhaps internationalization is taking place in the USC MSOT program in a manner not identified in the literature. Students and educators in the USC MSOT program used external resources and therefore, educators exposed the students indirectly to the assumptions, values, and beliefs contained in those resources. It may, then be useful to consider this exposure to another culture via curricular resources as indirect internationalization. This is important because if educators and students explicitly identify the use of external resources as indirect internationalization, they can then decide whether the underlying assumptions, values, and beliefs are appropriate within their particular context. For example, the educators often compared and contrasted the cultural and contextual basis of assessments with the Caribbean context.

Educators, however, rarely discussed the underlying assumptions, values, and beliefs of other texts, theories, and practice models.

Internationalization is helpful in understanding the USC MSOT program; however, educators need to take caution to ensure that internationalization does not, like globalization, reinforce dominant views of Western and Northern countries. Knight (2004) asked “is internationalization a vehicle for increased understanding and appreciation of cultural diversity and fusion, or is it an agent of cultural homogenization?” (p. 29). Kubow and Fossum (2007) stated that:

... The preservation of the resident wisdom, especially in the face of “imperialist” forms of implanted and imported knowledge primarily from Western nations, is a way to maintain respect for and deference to indigenous knowledge or cultural ways of knowing” (p. 286).

When considering the use of external resources, unpacking the unseen cultural assumptions, values, and beliefs, is necessary to prevent unintentionally adopting the values and beliefs. The educators of the USC MSOT program used localizing strategies that facilitated the use of external resources while using local knowledge.

Localizing Strategies Preserve the ‘Resident Wisdom’ within a Globalized and Internationalized Curriculum

The challenge for educators in countries where occupational therapy is an emerging profession is to preserve the “resident wisdom” within the local educational program while withstanding the challenges and maximizing the benefits of globalization and internationalization, specifically when utilizing resources, theories, scholarship, assessment tools, and practice models that are often from Western and Eurocentric countries. The students

and educators of the USC MSOT program offered some strategies to both reflect and respond to the needs and specific situations of Trinidad and Tobago and the Caribbean. First, the educators preserved resident wisdom by reflecting the local culture and context within the curriculum. A major way they did this was by hiring local educators to teach within the program. The act of hiring local educators rather than educators from another country acknowledges the value of local knowledge and experience. Another way of preserving and honoring local wisdom was by using discussion as a major instructional practice, which reflected the oral tradition that educators stated was common in Trinidad and Tobago.

Educators also preserved the resident wisdom by using local texts, local guest lecturers, and local case studies whenever possible. When using the Caribbean textbook, Ageing in the Caribbean (Rawlins & Alea, 2014), Anna (ed.) recognized the importance of local knowledge in Caribbean students' education. Several of the educators invited local guest lecturers to their classes to give an insider's perspective of a particular health condition, which again prioritized local knowledge alongside the information students were learning from educators, texts, and other sources. Most of the educators used case studies informally in their classes or formally as part of assignments or assessments. These case studies often represented educators' practice scenarios in Trinidad and Tobago and therefore demonstrated the importance of local practitioner knowledge to students. Therefore, many of the educators' reflective and responsive strategies not only connected the curriculum to the local culture and context, but also recognized and affirmed local knowledge and expertise, alongside and despite the challenges of, an increasingly globalized and internationalized world.

Implications for Education Practice

Occupational therapy has become increasingly popular over the past years as evidenced in the increasing demand for occupational therapy education programs around the world (World Federation of Occupational Therapists, 2008, 2016b). Many of the new programs are not in countries that have the resources for or histories of occupational therapy that support the production of resources that reflect the culture and context of those places. Therefore, resources may not reflect specific learning needs of the students in order to prepare them to practice within their communities. The educators of the USC MSOT program have created localizing strategies that respond to specific contextual realities and local learning needs of the students while using resources created elsewhere. In this section, I will examine theories of pedagogy and learning that will further explain the results and initiate a discussion regarding future practice and research.

Critical Occupational Therapy Education

It is critical for occupational therapy educators in countries where the profession is emerging and for those educators who support them to problematize and make it explicit that much of the external resources used may represent different values than those of the local community. The degree to which USC MSOT made explicit that most of their curricular resources were from other countries and contexts was inconsistent. The educators would make it clear that assessments were produced in other countries and that test items were not representative of Caribbean cultures and contexts; however, most educators did not explicitly discuss the potential mismatch of assumptions, values, and beliefs within the texts, theories, and practice models that the students were using. The educators did however, frequently use localizing strategies such as discussion, modification of case studies, and assignments requiring

students to tie content to the specific situation of Trinidad and Tobago and the Caribbean, which indicated an implicit acknowledgement of the need to supplement external resources with instructional activities that were contextually and culturally relevant.

Occupational therapy educators should take a note from scholars who advocate for the occupational therapy and occupational science to take a more critical approach (Hammell & Iwama, 2012; Laliberte Rudman, 2013). In her 2012 Townsend & Polatajko Lectureship, Laliberte Rudman (2013) called for a critical occupational science based on critical social theory, which illuminates how societal structures and policies reinforce power of dominant groups while marginalizing members of less powerful groups. A critical occupational science examines how political, economic, social, and cultural forces influence people's occupational possibilities. Laliberte Rudman (2013) voiced concern over the "individualizing of occupation... the ways the occupational performance challenges and inequities are often framed in broader society." (p. 299). In her view, these are framed as being due to individual shortcomings rather than to failures at the broader societal level. Similarly, Hammell and Iwama (2012) called for a critical occupational therapy in which practitioners challenge occupational injustices and promote occupation as a human right as it influences well-being. Critical occupational therapy actively acknowledges that membership in groups such as race, gender, class, ethnicity, and sexuality can negatively impact well-being due to systemic discrimination and oppression within society. Critical occupational therapists strive to make changes beyond the individual level, at the social, community, and political level. Further, Hammell and Iwama (2012) recognized that many of the profession's theories come from the Western world and therefore do not reflect the conditions of those in non-western societies "such as poverty, discrimination, social inequality, marginalization, social exclusion, powerlessness, and exploitation – that constrain the lives of so

many of the global population” (p. 389). These critical perspectives in occupational science and occupational therapy are powerful tools for occupational scientists and therapists to advocate for people and population groups who often experience marginalization.

Now that occupational therapy education is globalized, internationalized, and transported across borders, it is also time for critical occupational therapy education. Like critical occupational therapy and critical occupational science, critical occupational therapy education will actively examine the power relationships among educators, institutions, and learners and inquire about where and how and from whom learners derive knowledge. Critical education empowers students and educators to uncover and understand the hidden systems of injustice within education and society. Critical occupational therapy educators facilitate students to uncover the how assumptions, values, beliefs that exist in content and teaching practices may reinforce the ideologies of dominant cultural groups. By using the principles of critical pedagogy and transformative learning theory, educators can help students to identify dominant cultural ideologies and to understand how those dominant cultural ideologies influence occupation and occupational therapy and may overshadow less dominant ideologies.

Critical pedagogy in occupational therapy education. Critical occupational therapy education would benefit by looking to critical pedagogy to guide its approach to teaching and learning. Critical pedagogy is a transformative learning approach to education based on the work of Paulo Freire. Critical pedagogy attempts to understand how knowledge is constructed in educational systems and why some constructions of knowledge that benefit the dominant culture are favored over constructions of knowledge that may benefit people of non-dominant groups (McLaren, 2017). Freire’s work focused on education that empowers people to recognize, understand and change the political and social forces that influence and often oppress them

(Dirkx, 1998) by facilitating students' ability to recognize the social and political factors that oppress them and to act on them (Kincheloe, 2008; McLaren, 2017; Monchinski, 2008).

Kincheloe (2008) stated that teachers using critical pedagogy "... are aware of the complexity of the educational process and how schooling cannot be understood outside of the social, historical, philosophical, cultural, economic, political, and psychological contexts that shape it" (p. 17).

Critical educators address the effects of systemic oppression on curricula and learning and in society at large by identifying and analyzing dominant ideologies present in the classroom, curriculum, and the society (McLaren, 2017). Ideologies are similar to assumptions in that they refers to the ideas and social practices that represent the way we see the world. These ideologies and are seen by those that hold them as natural and common sense. Through critical pedagogy, students learn to connect the content they learn and the methods that educators use to the values and assumptions underlying the content and teaching methods.

Teachers using critical pedagogy "must expose the hidden politics of what is labeled neutral" (Kincheloe, 2008, p. 10) in our textbooks, theories, and practice models. Critical educators expose the hidden politics by teaching students to identify dominant ideologies or assumptions that influence education and society by problematizing, or bringing to light, traditional power relations between those that hold power and those that do not (McLaren, 2017). Educators should expose what is labeled as culture and context-free to ourselves and then equip our students to excavate the assumptions, values, and beliefs lying within the content and texts they consume. In critical pedagogy, acting on new understandings of knowledge to end oppression is key. Through praxis, the critical reflection on action with the aim of understanding of how power operates, students and educators can begin to act against oppression (Kincheloe, 2008; Monchinski, 2008).

Educators are often not aware of the political and systemic forces at play when selecting a pedagogy or creating a program or class curriculum. Critical educators, however, know that educational systems are often unequal and favor the people and knowledge from privileged groups and marginalize others. Kincheloe (2008) advocated for a critical pedagogy that encouraged exploration of alternate perspectives as to not reinforce perspectives of dominant groups. However, within the profession of occupational therapy and especially in countries where the profession is emerging, there are often not alternative resources available. It is necessary, then for educators to encourage students to explore multiple perspectives of the resources they use and the content they learn. It is not necessarily a problem that the USC MSOT educators import resources from Western and Northern countries; however, students and educators should examine the external resources and determine if and how the resources are useful within their context.

Critical pedagogy and the USC MSOT program. The USC MSOT faculty and students understood that the external resources they used sometimes fell short in preparing their students to address the cultural and contextual nuances of the Caribbean because those resources were based in different social historical, cultural, economic, and political contexts. Educators therefore used localizing strategies to link external resources and content to the culture and context of the communities in which the USC MSOT program existed and where the students would eventually practice. Using localizing strategies may have minimized some problems students had with using external resources because educators made content relevant by relating it to local situations. The educators did not use a critical approach and highlight the dominant ideologies or assumptions that the external resources represented. Using praxis within a critical approach, educators could encourage students to understand the values and assumptions that the

external resources were reinforcing and then establish a plan of action. This plan could include evaluating the assumptions of the external resource, deciding whether or not it represented the values of the students and local community, and if not, modifying or adapting the resource for use within their community.

Critical educators recognize the effects of racism, sexism, gender bias, and heterosexism on learning in the classroom and how power influences curricula and learning and in society at large and help students recognize and address that by identifying dominant ideologies and taking action and reflecting on that action through praxis (Kincheloe, 2008; Monchinski, 2008). In the USC MSOT program, many educators and students felt that the Black students would face some challenges as they entered the occupational therapy profession in which they would be the minority. Faculty appeared to deal with the issue inconsistently through course-level and program-level localizing strategies. For example, one student acknowledged that the issue of race came up in the program but that faculty did not address it directly or explicitly. While one educator, Amelia, addressed the issue directly through the course-level localizing strategy of discussion in her courses, she also acknowledged the need to address the issue more directly. Later in the study, educators employed the program-level localizing strategy of arranging for the first cohort of students to take part in a workshop with a human resource specialist to discuss the challenges they may face when entering the workforce. While these localizing strategies addressed the issues of race within the program, educators using a critical education approach would facilitate the students to identify the dominant ideologies within the program and society that created the situation in which some Black students may not be treated the same as non-Black students as they entered the occupational therapy profession. This may include identifying

actions the students and educators could take to help confront the problem as well as reflecting on those actions.

Transformative learning supports localized curricula. Mezirow's transformative learning theory is useful in guiding a critical occupational therapy education practice and facilitating the process of identifying assumptions, values, and beliefs. Mezirow's transformative learning theory holds that learning occurs when learners become aware of assumptions and change them in order to act in novel ways (Hooper, 2007; Mezirow, 1997, 2018). Like, critical pedagogy, transformative learning theory also states that learners can alter their assumptions through reflection (Cranton, 2002; Dirkx, 1998; Hooper, 2007, 2008). Learners reflect on content, process, and on premises (Hooper, 2008; Mezirow, 1991). When reflecting on content, learners consider what happened in a given situation. Reflection on process considers what learners were perceiving, thinking, feeling, or acting during the situation. Finally, reflection on premises goes further to explore why learners think, feel, or act why they do and how that affected the situation.

Educators encourage reflection through communicative learning methods, which is the understanding of others through consensus and discourse (Cranton, 2002; Mezirow, 1997). The communicative process strives to understand different interpretations of an issue by looking at the evidence in as many different perspectives as possible. Learners then become aware of their own assumptions and then can evaluate those assumptions in the light of other perspectives and information.

Practicing critical occupational therapy education. Transformative learning theory is helpful in facilitating students to identify their own assumptions as well as the assumptions existing in the resources they are using because it guides critical reflection. The educators in the

USC MSOT program used various localizing strategies to connect what the students were learning to the specific cultural and contextual factors of Trinidad and Tobago and the Caribbean. Educators did not facilitate students to engage in critical reflection with the purpose of identifying their own assumptions. While transformative learning theory does not outline specific instructional approaches or processes, scholars have suggested strategies that are helpful for the educator aiming to enact a critical and transformative occupational therapy curriculum.

To illustrate the strategies from transformative learning theory that educators and students can use in a critical occupational therapy curriculum, let us consider the issue of race, a local cultural and contextual factor that the students and educators were facing as many of the students were entering the occupational therapy profession. The USC MSOT educators did not use transformative learning strategies to address the issue of race in the program, therefore this example is hypothetical and I use it to illustrate how the educators could use transformative learning to respond to this cultural and contextual factor of race. Transformative learning would be effective in this situation to empower students to reflect critically on their experiences related to being the first Black occupational therapy students in the Caribbean. Transformative learning begins with an activating event, which is a novel occurrence that allows a person to realize that their current point of view does not align with a new experience or new learning event (Cranton, 2002). Educators can facilitate activating events within an occupational therapy curriculum. For some students, simply attending their first national occupational therapy association meeting and being among the first Black attendees may have been an activating event. For other students, it may have been attending their service learning or fieldwork site. For educators, it may have been hearing about the students' perceptions of their experiences as Black students in a non-Black profession.

Cranton (2002) then suggests to facilitate learners in articulating their own assumptions, values and beliefs. This can occur through journaling or discussion in small and large groups. Discussion of students' perceptions of entering the profession did occur in some of the classes and Amelia (ed.) directly addressed their concerns through discussion. These strategies may have also occurred in the workshops run by the external human resource specialist. After small or large group discussions, educators could then help students identify assumptions within the profession and community that aligned and did not align with their own. In class, educators could ask students to write down the values and assumptions of the profession, educators, and community and then share their ideas in small groups. In these groups, educators could facilitate students to engage in critical reflection through discourse and the sharing of perspectives and challenging ideas about the identified assumptions.

The value of identifying the assumptions of the students, profession, educators, and community is to understand how assumptions may differ and how to proceed when they do. Some assumptions then may not need to change. Assumptions will only need to change if students feel that it is beneficial to their learning or future practice. This critical, transformational, and empowering conversation benefits students, educators, and the clients that the students will serve. The power of critical occupational therapy education is that students and educators decide together what is appropriate within their specific community.

Localizing strategies as a component of critical occupational therapy education.

Educators and students can use critical occupational therapy education using transformative learning theory to excavate assumptions, values, and beliefs of curricula through critical reflection. Using localizing strategies can also anchor a program within its local culture and context and help preserve its 'local wisdom.' This 'local wisdom' will enable educators and

students to use external resources, which may be the only texts or theories available in a community where occupational therapy is new. This ‘local wisdom’ is manifest as the localizing strategy of the educator using an example from her practice that allows the student to connect what she learns about working with a hand injury to an actual individual in a clinic that does not have the resources or materials described in the textbook. Local wisdom is also manifest as the localizing strategy of placing students in service learning sites where there is no occupational therapist and requiring them to speak publicly about the need so that they have the skills needed to advocate on radio or to public officials when they graduate. Educators around the world should create localized learning strategies based on the specific local cultural and contextual factors and the local learning needs. Each local learning strategy will vary based on the place, the students, and the educators using it.

A Model of a Localized Occupational Therapy Curriculum

Earlier in this paper, I introduced the Model of Cross-Cultural Curriculum (Figure 3) to explain the relationship of culture and context to curriculum as I interpreted it from the literature. I will now evaluate that original model for its goodness of fit given the results of this study. The original model (Figure 3) consisted of the categories culture, context, and curriculum. Briefly, the original model illustrated that the curricular elements of educators, learners, content, and instructional processes are a part of and influenced by culture (top panel of the figure) and context (side panel of the figure). Culture influences curricula as a product of the assumptions, values, and beliefs of cultural groups. Context as represented in the original model was inseparable from culture and referred to larger influences on curricula such as political, social, and economic policies and institutions.

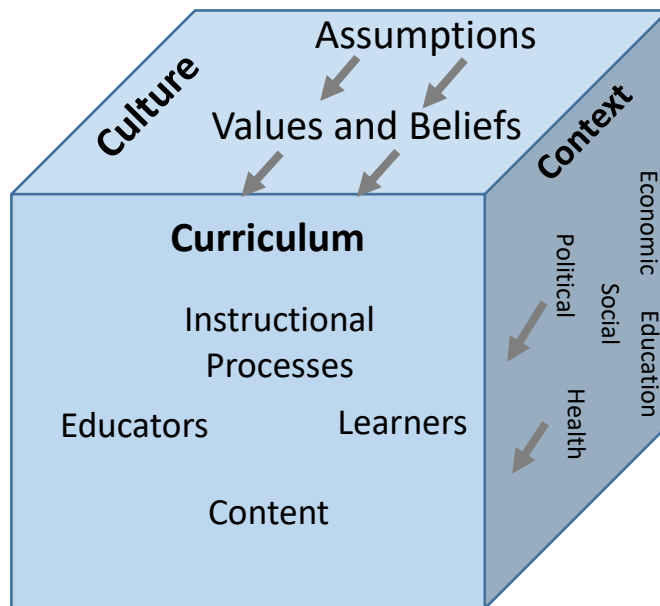


Figure 3: Model of International Cross-cultural Curricula. The model illustrates that context and culture influence curriculum and its elements of instructional processes, content, learners, and educators.

The revised model, titled the Model of a Localized Occupational Therapy Curriculum (Figure 4), more accurately represents the results of the study, which illustrate the ways in which the USC MSOT program localized their curriculum within the culture and context of Trinidad and Tobago and the Caribbean. A localized curriculum is one that educators design to reflect and respond to the local cultural and contextual factors, meet the local learning needs, and to meet the needs of the local service users. I will explain the ways in which the study reinforced the elements of the original model, what has changed, and how I depict those changes in the new model.

The broad categories of curriculum, culture, and context continue to reflect the results of the study and remain major components of the model. The results of this study however, have refined and added additional detail to the categories and illustrate processes among the

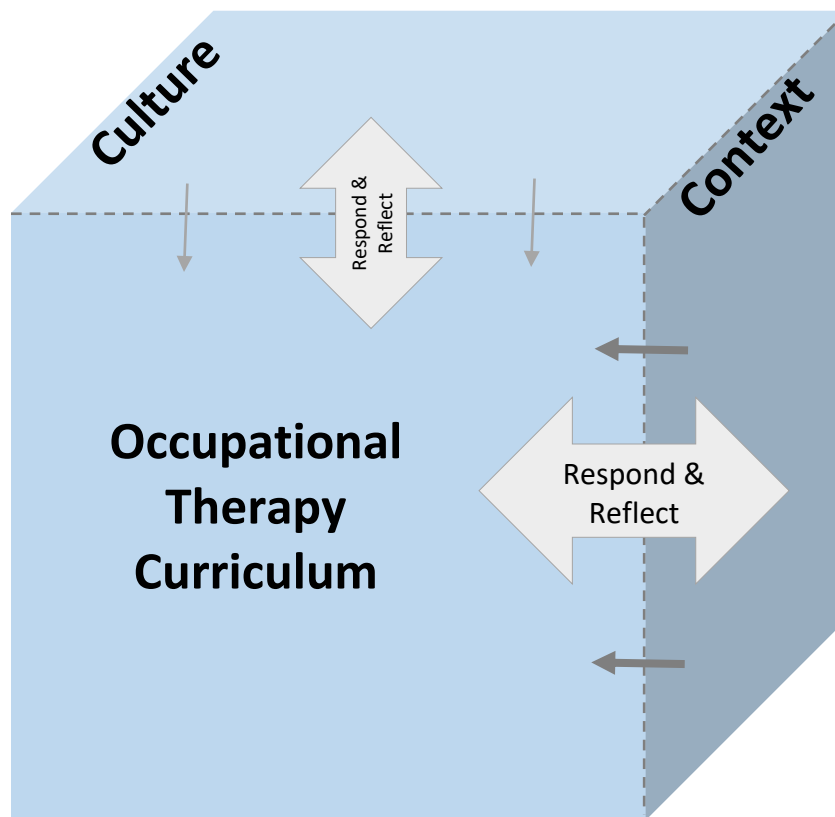


Figure 4: The Model of a Localized Occupational Therapy Curriculum. A localized curriculum responds to and reflects culture and context. Educators respond to local culture and context by identifying specific cultural factors that will influence local occupational therapy practice and by addressing local learning needs resulting from the local cultural factors. Educators reflect culture and context by using local educators and using familiar teaching processes.

categories. I will continue to use the cube as it graphically demonstrates the interconnection between curricula, culture, and context. Occupational therapy curriculum is on the front face of the cube as it is the most visible category. The original model specified educators, learners, instructional processes, and content as elements of curricula as those were topics highlighted in

the literature. While this study supported those elements as parts of curricula, curricula are made up of, and influenced by, many other elements (Lattuca & Stark, 2009). Additionally, conceptualizing the elements of curriculum was beyond the scope of this study. Therefore, I label the front face of the cube occupational therapy curriculum.

Culture remains on the top face of the cube and context on the side face of the cube. When constructing the original model, I realized that culture and context are not separate concepts. Culture is a type of context, and after completing this study, I continue to feel that it is helpful to distinguish culture and context. Culture is composed of the deeply held assumptions, beliefs, and values of a group (Hofstede, 2001; Schein, 2004; Trompenaars & Hampden-Turner, 2012) of people and context encompasses the many external factors that influence a situation. For example, the educator, Vanessa, illustrated the cultural factor of social hierarchy when illustrating the need for students to be careful when speaking with physicians. Educators addressed several contextual factors unique to Trinidad and Tobago and the Caribbean such as the lack of resources, lack of research, and limited knowledge of occupational therapy. Separating the concepts of culture and context will help students and educators, through critical reflection and discourse, to identify which elements influence the localized nature of their curricula. The perforated lines separating culture and context and all of the elements of the cube illustrate the interconnection.

The original model (Figure 3) illustrated that culture influences curriculum. This study reinforced that relationship but not to the same degree. The USC MSOT program director and educators sometimes reflected the local culture in the educators they hired and instructional processes they used. The original model did not show, and what I did not expect, however, was how difficult it would be for participants and me to identify the cultural factors that influenced

the program or how they reflected or responded to them. This difficulty may be because people are often unaware of the cultural assumptions, values, and beliefs that they have or that drive their decisions and behaviors regarding education and learning. Or, identifying cultural factors may have been difficult because I did not ask the right questions or because I was not ready or able to hear the answers. In the new model, I illustrate this relatively less prominent role of culture on curriculum as shown in the findings with light gray arrows from culture to curriculum. Although not depicted in the model, I continue to rely on the scholars and describe the layers of culture, which consist of assumptions, values, and beliefs, which are manifest in the practices and artifacts of a culture, such as curricula (Schein, 2004; Trompenaars & Hampden-Turner, 2012).

The original model (Figure 3) illustrated that context significantly influenced curricula. The Model of a Localized Occupational Therapy Curriculum (Figure 4) supports and depicts this influence with dark gray arrows moving from context to curriculum. In fact, the study found that the USC MSOT educators responded to six local contextual factors specific to Trinidad and Tobago and the Caribbean. The bidirectional arrows in the new model indicate that the educators responded to and reflected the local culture and context. The original model did not illustrate this process. The USC MSOT program *responded* to the specific culture and context of the community to prepare students for future practice with the local community. Educators responded to the local culture and context by responding to local learning needs, which corresponded to the six cultural and contextual factors. The original model did not identify these relationships and responses to the local culture and context. The educators responded to the local contextual factor that occupational therapy was relatively unknown in the Caribbean by teaching students to be advocates for the profession. Educators facilitated the development of students'

advocacy skills by using the program-level localizing strategy of service learning throughout the curriculum so students would understand the need for occupational therapy in the community. Additionally, the study found that the educators responded to these learning needs by using program- and course- level localizing strategies, which also helped connect external resources to the local culture and context. The bidirectional arrow between culture and curriculum is significantly smaller than the bidirectional arrow between context and curriculum. This difference in size of the arrows illustrates that the participants and I had more difficulty identifying instances in which educators responded and reflected the culture of Trinidad and Tobago. Educators and students were more likely to identify instances in which educators responded to and reflected the context of Trinidad and Tobago and the Caribbean in the curriculum than the culture of the region. The USC MSOT curriculum also *reflected* the culture and context of Trinidad and Tobago and the Caribbean when it mirrored common practices or qualities within the curriculum. For example, administrators selected educators from Trinidad and Tobago, thus reflecting people from the Caribbean.

The Model of a Localized Occupational Therapy Curriculum (Figure 4) is a current representation of how curricula are situated within a local culture and context given extant scholarship and the study completed with the students and educators in the Masters of Science in Occupational Therapy program at the University of the Southern Caribbean in Trinidad and Tobago. This model represents only one case and should be explored and revised when used with other education programs. The model's utility will be in facilitating educators and students to reflect critically on their own assumptions, values, and beliefs and those represented within their curricula and in their local culture and contexts. Students and teachers can then identify the

cultural and contextual factors that impact their educational program, what local learning needs that produces and address those together in the classroom.

Initial Steps of Building a Theory of Localized Occupational Therapy Curricula

The study of the USC MSOT program is the beginning of the building of a theory describing how occupational therapy educators localize curricula within their local culture and context. While this was not an original intent of the study, the findings of the study identifying the ways the educators localized the curriculum and the Model of a Localized Occupational Therapy Curriculum (Figure 4) demonstrate some characteristics of theory building. I will briefly describe theory building within applied disciplines, how this study fulfills some phases of theory building, and future steps needed to advance development of a Model of a Localized Occupational Therapy Curriculum as a theory.

A theory is “... any coherent description or explanation of observed or experienced phenomena (Gioia & Pitre, 1990, p. 587). Theory building is the continual process of creating, corroborating, applying, and modifying a theory (Lynham, 2002, p. 222). Lynham (2002) describes theory building as happening in five phases that can happen in any sequence: (a) conceptual development, (b) operationalization, (c) application, (d) confirmation or disconfirmation, and (e) continuous refinement and development (p. 229).

The scholarship presented in this paper operates primarily at the conceptual development and operationalization phases of theory building. At the conceptual development phase, the theorist produces a conceptual framework that provides an initial understanding of the phenomenon, which may be a model (Lynham, 2002). Representative of the conceptual development phase, this paper presented the Model of International Cross-cultural Curricula (Figure 2) via an integrative literature review resulting in an initial understanding of how culture

and context influence curricula according to the literature. In the study of the USC MSOT curriculum, further theoretical development continued as I gathered data from students, educators, observation, and curricular artifacts. This data collection and analysis led to the modification of the initial theoretical framework, leading to a more detailed understanding regarding the relationships between the USC MSOT curriculum and culture and context.

The operationalization phase connects the conceptualization phase with practice. The purpose of this phase is to confirm the theoretical framework in the real world of practice. In this phase, educators translate the theoretical framework into practical components that researchers can be confirm. The study connected the concept development phase to practice by taking place in the natural environment of the Master's program. Therefore, it allowed me to identify exactly how educators connected their curriculum to culture and context in the real world of Trinidad and Tobago. This study did not, however, demonstrate all of the characteristics of the operationalization phase. I did not set out to operationalize each element of the Model of International Cross-Cultural Curricula. Rather, I designed the study in a more inductive manner to discover constructs indicative of a curriculum localized in the local culture and context.

At the confirmation or disconfirmation stage, educators plan research that demonstrates that the theoretical framework does or does not adequately explain the phenomenon at hand. The application phase enables the theory to be used in practical situations in order for theorists to understand the usefulness and relevance of the theory (Lynham, 2000, 2002). Finally, the theory undergoes continual refinement and development unless it is found false at which point it is modified or discarded (Lynham, 2002). The purpose of this study was to identify the ways in which educators localized the USC MSOT curriculum. Therefore, further research expanding the study of how educators localize curricula within their local culture and context beyond one case

will be necessary to confirm or disconfirm the Model of a Localized Occupational Therapy Curriculum (Figure 4). Applying the model to several occupational therapy programs in different contexts will help identify the utility of the model in facilitating educators in creating localized curricula. Finally, through ongoing research an application, the model will refined and developed to incorporate the findings of various scholars and educators using and studying the model.

Implications for Future Research

This study was the first to explore how educators in countries where occupational therapy is an emerging profession localize a program within their local context. The next step would be to expand this research beyond a single case to explore the how other occupational therapy programs localize their curricula within their cultures and contexts and to continue building and defining the concepts within the Model of a Localized Occupational Therapy Curriculum. This study identified that the USC MSOT program used external resources, which sometimes did not align with the culture and context of Trinidad and Tobago and the Caribbean. It is not clear beyond anecdote and personal experience that educators around the world use many of the same resources from Western and Northern countries. It would be beneficial to carry out an international survey of occupational therapy educators describing the textbooks, articles, theories, assessment tools, and practice models that educators around the world use. Then educators and researchers would have an accurate accounting of what resources educators were using. A qualitative component could accompany this survey examining if and how educators adapted these resources to their local cultures and contexts.

There is scholarship exploring the ways in which teaching processes and approaches from the Western world work, or often do not work when transferred to other parts of the world (Crabtree & Sapp, 2004; Nguyen et al., 2012; Nguyen et al., 2009; Pham, 2016). This paper

examined how educators used instructional processes to localize curricula within the local context. This paper did not, however fully explore the role of instruction as a means of reflecting the local culture and context. Future research should examine the curricular artifacts, field notes, and interview and focus group transcripts from this study to explore the role of instruction as means of reflecting the local culture and context in the curriculum.

The focus of this study has been on occupational therapy educational programs in countries where the profession is emerging; however, situated learning applies to learners in all places. Educators need research to examine how educators in all places localize curricula within their unique cultures and contexts. This is especially needed in areas where occupational therapy programs serve populations that are underserved and may be underrepresented in mainstream curricular resources.

The WFOT specifically identified “local health giving occupations” as one of the contextual elements that educators should consider when implementing an educational program (World Federation of Occupational Therapists, 2016a, p. 28). It is striking to me that the results of this study did not find occupation as a contextual factor or part of a localizing strategy that helped educators link resources or content to the local culture and content. It may be that educators did not use it as a localizing strategy. Or, it may be that I simply did not ask the question. Future researchers should seek to understand the role of occupation in localizing curricula within the local culture and context.

Relationship of the Study to Occupation and Rehabilitation Science

The study of the USC MSOT program examined the relationship of teaching and learning within the culture and context of Trinidad and Tobago and the Caribbean. By examining the relationship of culture and context to education and learning, this study aligns with key

foundational concepts of occupation science and rehabilitation science. The core mission of occupational therapy and the core subject of occupational therapy education is “... human performance and participation in everyday occupations and contexts across the lifespan” (Colorado State University Occupational Therapy Department, 2017). Occupational science and rehabilitation science both support the mission of participation and performance in occupations. Occupational science is a basic science that studies people as occupational beings who have an innate need to engage in occupations (Wilcock, 2005; Yerxa et al., 1989). Rehabilitation science is “a study of function, focusing on the processes by which disability develops and the factors influencing these processes” (Seelman, 2000).

This study found that the educators of the USC MSOT program used specific strategies to localize their curriculum within their local culture and context. This study does not directly contribute to occupational science or rehabilitation science; however, this study is consistent with the basic premise in occupation science and rehabilitation science that context, including culture, influences the respective core subjects of occupation and disability. Occupational scientists have been interested in the interaction of the person, environment, and occupations and how that influences health and well-being (Christiansen & Townsend, 2010; Wilcock & Hocking, 2015). This conceptualization of environment includes culture and context (Christiansen & Townsend, 2010; Iwama 2010). In rehabilitation science, researchers view disability as a result of several factors including the person and the environment, which includes the physical, social, and cultural environments (Pledger, 2003).

While both occupation science and rehabilitation science consider the transaction of context and their core subjects, I situate this study closer to occupation science, because of the main tenet that occupation arises in transaction with context, people, and tasks. In the

transactional view of occupation, the individual, the environment, and the occupation are inseparable (Dickie, Cutchin, & Humphry, 2006). The environment includes the physical social, cultural, and political contexts of one's surroundings. The meaning of occupation depends on the context where the occupation occurs and the social norms of that particular context (Reed & Hocking, 2013). In a transactional view, the occupation, context, and person affect each other and the meaning of that particular occupation.

This study can be viewed in terms of the occupations of teaching and learning. I examined how the educators of the USC MSOT program teach and how the students learn in transaction with their particular context. Their context included the six cultural and contextual factors identified in the study such as the lack of local resources and lack of local knowledge of occupational therapy. The unique transaction of educator experience, student learning needs, and local cultural and contextual factors challenged the educators to adapt and modify their curricular and instructional approaches to meet the needs of their students and local communities.

I did not use occupational science as a conceptual frame for this study; however, occupational science offers a unique lens through which to view the occupation of teaching and specifically localizing a curriculum in a specific culture and context. Future researchers may wish to intentionally and specifically study the occupation of localized teaching to understand the transactions among contexts, students, educators, teaching, and learning.

Strengths and Limitations

Any case study is limited by examining one instance of the phenomenon at hand (Merriam, 1998). In the case of constructivist, qualitative research the purpose is to reach an understanding of a particular topic through the perspectives of people in one or more cases. The purpose is not to reach an objective truth about the phenomenon, of how the USC MSOT

program is creating a program that is localized in the culture and context of Trinidad and Tobago, but to understand how the people involved perceive they are doing that (Lincoln et al., 2011). The primary strength, which gives this study its depth, is the amount of time I was able to immerse myself in the program as a participant observer. Receiving a Fulbright Student Grant allowed me to immerse myself in the program as a faculty member for ten months getting to know the faculty and students well and completing repeated interviews, focus groups, observations, and member checks.

I selected the USC MSOT program as a case using both key informants and convenience sampling. My advisor introduced me to the director of the program. Although I did explore other opportunities, this may have limited me from including other education programs in my search for potential case sites. On the other hand, the selection of the USC MSOT program was also purposive because the program met the characteristics required to answer the initial research questions (Gibson & Brown, 2009).

All of the educators who taught in the program and all of the students enrolled in the program were invited to participate and all consented to participate. However, only the students and educators who came to the focus groups had their perspectives recorded and explored as part of the study. This may have included some participants' viewpoints and excluded others.

One limitation of this study was that I, a White, male, American, outsider carried out a study examining culture and context in a country with which I was not familiar. I asked myself, how I could hope to carry out, analyze, and construct a narrative that accurately depicts the experience of Caribbean students and educators, who represent a diverse ethnic and racial background. Methodological strengths helped minimize some of the limitations related to my outsider status. As mentioned before, prolonged exposure to and immersion within the USC

MSOT program allowed me to gain access to the group and site as a visiting faculty member and acquire some understanding of the cultural and contextual complexities affecting the program and how the students and educators responded to those complexities. Teaching a course within the program allowed me to develop relationships with the educators and students that I would not have been able to build if I was only a researcher. Prolonged observation and presence in the program meant that I had many formal and informal conversations with educators and students allowing the conversations about culture or race to occur authentically.

Performing member checking twice during the study allowed me to check for understanding as well as to deepen the analysis through participation with students and educators (Morse, 2018). During member checking focus groups, I was able to share and receive feedback about initial findings, which often led to increased understanding of the cultural and contextual realities of Trinidad and Tobago. Peer debriefing and frequent memo writing allowed me to keep track of my evolving perspectives throughout the study.

Another limitation of the study was having only one primary researcher involved in a long and complex study. Because I was designing a course and teaching for a portion of the study as well as collecting and analyzing data simultaneously, it was not possible to analyze all of the data for this study. Therefore, I did not analyze some of the artifact and field note data, as well as the interview data from fieldwork educators and administrators in full. This is a limitation in the study and leaves possibilities for future analysis and research.

Conclusion

The WFOT requires educators to design occupational therapy education programs that consider the local context (World Federation of Occupational Therapists, 2016a), but scholars had not identified the elements of or strategies used by educators to run programs that meet the

specific needs of their countries and communities. Many programs exist in places where the profession is emerging and where they must import curricular resources such as texts, theories, practice models, and assessments from contexts and cultures other than their own. This ethnographic case study was the first to identify the characteristics of and strategies for implementing a localized occupational therapy curriculum. This study contributed to occupational therapy education scholarship by:

- Identifying localizing strategies and describing how educators used these strategies to respond to the specific local cultural and contextual factors
- Identifying elements of a localized occupational therapy curriculum
- Presenting a model of a localized occupational therapy curriculum
- Presenting recommendations for critical occupational therapy education

To understand the challenges to and strategies for implementing an occupational therapy education program situated in the local culture and context, I conducted an ethnographic case study with the USC MSOT program in Trinidad and Tobago. Over an eight-month period, I interviewed educators, conducted focus groups with students and educators, observed class sessions and department meetings, attended department functions, taught a course, and collected and analyzed curricular documents. Through open coding and thematic analysis, I found that the educators of the USC MSOT program used specific strategies to respond to the specific culture and context of Trinidad and Tobago and the Caribbean.

Educators sometimes reflected the culture and context of Trinidad and Tobago and the Caribbean through the instructional processes they chose and the broader curricular decisions they made. For example, when an educator chose to speak in an informal way, this reflected the local culture familiar to the students. Additionally, when the university hired people from Trinidad and Tobago to teach in the program, this reflected the local culture and context. The

findings indicated that the educators responded to specific local cultural and contextual factors that resulted in specific local student learning needs. By responding to these specific factors and needs, the educators were ensuring that the students would be ready to practice in Trinidad and Tobago or the Caribbean with the unique challenges and situations that it would pose. To respond to the local student learning needs, the educators used localizing strategies to link what the students were learning to the local culture and context. For example, to prepare students to address the lack of awareness of occupational therapy, educators required students to do many oral presentations so that they would be comfortable advocating for the profession as new graduates. Using localizing strategies such as local case studies, local guest speakers, and discussion linking external resources to a local example allowed educators to use resources from other contexts while valuing and using local knowledge that would facilitate learning and ultimately ensure that future therapists were better equipped to serve local clients.

This study is timely because the USC MSOT program is one of many occupational therapy education programs attempting to meet the needs of an increasingly aged and disabled population (World Health Organization, 2018a, 2018b). Like the USC program, many other programs in places where occupational therapy is emerging, do not have access to the latest therapy equipment, have a lack of educators and fieldwork educators, face a lack of awareness of occupational therapy in the region, and experience a paucity of local research.

Additionally, globalization brings occupational therapy educators around the world together through social media and global communication technology, global travel, and global knowledge. Occupational therapy educators often share common professional principles and values, which popular texts and theories promote worldwide through international institutions. It is important and vital that an international profession have common values and principles. This

study also reminds educators of the great diversity of knowledge that lies in every community where occupational therapy education takes place. Educators can connect the local situation, culture and context to daily teaching and content through localizing strategies. While the results of this study are not generalizable, other educators wishing to establish localized occupational therapy curricula may use them as a guide. Following from the results and discussion of this study, educators may consider:

- Facilitating critical reflection in the classroom to identify and discuss hidden assumptions in the classroom
- Identifying local cultural and contextual factors
- Identifying local student learning needs
- Hiring local educators when possible
- Facilitating and preparing students to conduct local research
- Linking external resources to specific local contextual factor

Occupational therapy is a quickly growing profession that seeks to improve the health and well-being of people all over the world. As a profession, we value the diversity of perspectives, cultures, and contexts that influence occupation. As occupational therapy educators, we acknowledge the vital role culture and context have on education. In our connected and dynamic world, it is imperative that we understand how to equip the next generation of therapists to apply best occupational therapy practice within the local culture and context. This study has identified educational practices of one occupational therapy education program and elucidated one educational model to illustrate these practices. I encourage future research to explore the utility of the Model of a Localized Occupational Therapy Curriculum and to examine what strategies educators use to localize occupational therapy or other healthcare education programs in the local culture and context.

REFERENCES

- Altbach, P. G., & Knight, J. (2007). The internationalization of higher education: Motivations and realities. *Journal of Studies in International Education*, 11(3-4), 290-305.
- American Occupational Therapy Association. (2014). Occupational therapy practice framework: Domain and process, 3rd Edition. *American Journal of Occupational Therapy*, 68(Supplement 1), S1-S48. doi:10.5014/ajot.2014.682006
- Angers, J., & Machtmes, K. L. (2005). An ethnographic-case study of beliefs, context factors, and practices of teachers integrating technology. *The Qualitative Report*, 10(4), 771-794.
- Arnove, R. F. (2013). Reframing comparative education: The dialectic of the global and the local. In R. F. Arnove, C. A. Torres, & S. Franz (Eds.), *Comparative education: The dialectic of the global and the local* (4th ed., pp. 1-25). Lanham, MD: Rowman & Littlefield.
- Atchison, B., & Dirette, D. (2011). *Conditions in occupational therapy: Effect on occupational performance* (4th ed.). Philadelphia: Wolters and Kluwer.
- Barney, K., & Perkinson, M. (2016). *Occupational therapy with aging adults-E-book: Promoting quality of life through collaborative practice*. St. Louis, MO: Elsevier Health Sciences.
- Baum, C. M., Christiansen, C., & Bass, J. (2015). The person-environment-occupation-performance (PEOP) model. *Occupational therapy: Performance, Participation, and Well-being*, 4, 49-56.
- Baum, C. M., & Edward, D. F. (2008). *Activity card sort: Test manual*. Bethesda, MD: AOTA Press.

- Beagan, B. L. (2015). Approaches to culture and diversity: A critical synthesis of occupational therapy literature. *Canadian Journal of Occupational Therapy*, 82(5), 272-282.
- Bodycott, P., & Walker, A. (2000). Teaching abroad: Lessons learned about inter-cultural understanding for teachers in higher education. *Teaching in Higher Education*, 5(1), 79-94.
- Bovill, C., Jordan, L., & Watters, N. (2015). Transnational approaches to teaching and learning in higher education: Challenges and possible guiding principles. *Teaching in Higher Education*, 20(1), 12-23.
- Brereton, B. (2009). *A history of modern Trinidad, 1783-1962*. Champs Fleura, Trinidad: Terra Verde Resource Centre.
- Brown, J. S., Collins, A., & Duguid, P. (1989). Situated cognition and the culture of learning. *Educational Researcher*, 18(1), 32-42.
- Bruininks, R. H., & Bruininks, B. D. (2005). *Bruininks-Oseretsky test of motor proficiency manual* (2nd ed.). Bloomington, MN: PsychCorp.
- Bruner, J. (1996). *The culture of education*. Boston: Harvard University Press.
- Bruner, J. (2009). Culture, mind, and education. In K. Illeris (Ed.), *Contemporary theories of learning: Learning theorists in their own words* (pp. 159-168). New York: Routledge.
- Canadian Association of Occupational Therapists. (1997). *Enabling occupation: An occupational perspective*. Ottawa, ON: CAOT Publications ACE.
- Carswell, A., McColl, M. A., Baptiste, S., Law, M., Polatajko, H., & Pollock, N. (2004). The Canadian occupational performance measure: A research and clinical literature review. *Canadian Journal of Occupational Therapy*, 71(4), 210-222.

- Castro, D., Dahlin-Ivanoff, S., & Mårtensson, L. (2014). Occupational therapy and culture: A literature review. *Scandinavian Journal of Occupational Therapy*, 21(6), 401-414.
- Christiansen, C., & Townsend, E. A. (2010). An introduction to occupation. In C. Christiansen & E. A. Townsend (Eds.), *Introduction to occupation: The art and science of living* (2nd ed., pp. 1-34). Upper Saddle River, NJ: Pearson.
- Clark, A. M. (1998). The qualitative-quantitative debate: Moving from positivism and confrontation to post-positivism and reconciliation. *Journal of Advanced Nursing*, 27(6), 1242-1249.
- Colorado State University Occupational Therapy Department. (2017). Teaching and learning philosophy. Retrieved from <http://www.ot.chhs.colostate.edu/students/teaching-learning-philosophy.aspx>
- Crabtree, R. D., & Sapp, D. A. (2004). Your culture, my classroom, whose pedagogy? Negotiating effective teaching and learning in Brazil. *Journal of Studies in International Education*, 8(1), 105-132.
- Craik, J., Davis, J., & Polatajko, H. J. (2007). Introducing the Canadian practice process framework (CPPF): Amplifying the context. *Enabling occupation II: Advancing an occupational therapy vision for health, well-being & justice through occupation*. Ottawa: CAOT Publications ACEm, 229-246.
- Cranton, P. (2002). Teaching for transformation. *New Directions for Adult and Continuing Education*, 2002(93), 63-72.
- Creswell, J. W. (2013). *Qualitative inquiry and research design: Choosing among five approaches* (3rd ed.). Thousand Oaks, CA: SAGE.
- Crotty, M. (1998). The foundations of social research. London: SAGE.

- Dickie, V. (2014). What is occupation? In B. A. Schell, G. Gillen, & M. Scaffa (Eds.), *Willard and Spackman's Occupational Therapy* (12th ed.). Philadelphia: Lippincott Williams & Wilkins.
- Dickie, V., Cutchin, M. P., & Humphry, R. (2006). Occupation as transactional experience: A critique of individualism in occupational science. *Journal of Occupational Science*, 13(1), 83-93.
- Dimmock, C., & Walker, A. (2002). School leadership in context - Societal and organisational cultures. In L. Bell & T. Bush (Eds.), *The principles and practice of educational management* (pp. 70-85). Thousand Oaks, CA: SAGE.
- Dirkx, J. M. (1998). Transformative learning theory in the practice of adult education: An overview. *PAACE Journal of Lifelong Learning*, 7, 1-14.
- Dunn, W. (1999). *Sensory profile user's manual*. USA: Psychological Corporation.
- Dunn, W., Brown, C., & McGuigan, A. (1994). The ecology of human performance: A framework for considering the effect of context. *American Journal of Occupational Therapy*, 48(7), 595-607.
- Eldridge, K., & Cranston, N. (2009). Managing transnational education: Does national culture really matter? *Journal of Higher Education Policy & Management*, 31(1), 67-79.
doi:10.1080/13600800802559286
- Fazio, L. (2017). *Developing occupation-centered programs with the community* (3rd ed.). Thorofare, NJ: SLACK Incorporated.
- Folio, M. R., & Fewell, R. R. (2000). *Peabody Developmental Motor Scales, 2nd Edition (PDMS-2)*. Austin, TX: Pro-Ed.

- Folstein, M. F., Folstein, S. E., & McHugh, P. R. (1975). "Mini-mental state" A practical method for grading the cognitive-state of patients for the clinician. *Journal of Psychiatric Research*(12), 89-198.
- Frambach, J. M., Driessen, E. W., Beh, P., & van der Vleuten, C. P. (2014). Quiet or questioning? Students' discussion behaviors in student-centered education across cultures. *Studies in Higher Education*, 39(6), 1001-1021.
- Garcia, L. A., Kugel, J. D., Javaherian-Dysinger, H., & Huecker, E. (2016). Developing an indigenous, entry-level master's degree program in a country with an emerging OT profession. *The Open Journal of Occupational Therapy*, 4(3), Article 2.
- Gervedink Nijhuis, C. J., Pieters, J. M., & Voogt, J. M. (2013). Influence of culture on curriculum development in Ghana: An undervalued factor? *Journal of Curriculum Studies*, 45(2), 225-250.
- Gervedink Nijhuis, C. J., Voogt, J. M., & Pieters, J. M. (2012). The cultural complexity of international collaboration: Conditions for sustainable curriculum development in Ghana. *International Journal of Intercultural Relations*, 36(5), 647-658.
- Gibson, W., & Brown, A. (2009). *Working with qualitative data*. Thousand Oaks, CA: SAGE.
- Gioia, D. A., & Pitre, E. (1990). Multiparadigm perspectives on theory building. *Academy of management review*, 15(4), 584-602.
- Glesne, C. (2011). *Becoming qualitative researchers: An introduction* (4th ed.). Boston, MA: Allyn & Bacon.
- Guba, E. (1990). The alternative paradigm dialog. In E. Guba (Ed.), *The paradigm dialog* (pp. 17-27). Newbury Park, CA: SAGE.
- Guba, E., & Lincoln, Y. S. (1989). *Fourth generation evaluation*. Newbury Park, CA: SAGE.

- Guba, E., & Lincoln, Y. S. (1994). Competing paradigms in qualitative research. In N. K. Denzin & Y. S. Lincoln (Eds.), *Handbook of qualitative research* (pp. 105-117). Thousand Oaks, CA: SAGE.
- Gutman, S. A. (2017). *Quick reference neuroscience for rehabilitation professionals: The essential neurologic principles underlying rehabilitation practice* (3rd ed.). Thorofare, NJ: SLACK Incorporated.
- Haley, S. M., Coster, W., Ludlow, L. H., Haltiwanger, J. T., & Andrellos, P. J. (1992). *Pediatric evalutaion of disabilty inventory (PEDI)*. Boston: Boston University.
- Hammell, K. W. (2009). Sacred texts: A sceptical exploration of the assumptions underpinning theories of occupation. *Canadian Journal of Occupational Therapy*, 76(1), 6-13.
- Hammell, K. W. (2011). Resisting theoretical imperialism in the disciplines of occupational science and occupational therapy. *The British Journal of Occupational Therapy*, 74(1), 27-33.
- Hammell, K. W. (2013). Occupation, well-being, and culture: Theory and cultural humility/Occupation, bien-être et culture: la théorie et l'humilité culturelle. *Canadian Journal of Occupational Therapy*, 80(4), 224-234.
- Hammell, K. W., & Iwama, M. K. (2012). Well-being and occupational rights: An imperative for critical occupational therapy. *Scandinavian Journal of Occupational Therapy*, 19(5), 385-394.
- Heffernan, T., Morrison, M., Basu, P., & Sweeney, A. (2010). Cultural differences, learning styles and transnational education. *Journal of Higher Education Policy & Management*, 32(1), 27-39. doi:10.1080/13600800903440535

- Hocking, C., & Ness, N. E. (2004). *World Federation of Occupational Therapists: Advice for the establishment of a new programme of education for occupational therapists: WFOT*.
- Hofstede, G. (1980). *Culture's consequences: International differences in work-related values*. Beverly Hills: SAGE.
- Hofstede, G. (2001). *Culture's consequences: Comparing values, behaviors, institutions and organizations across nations*. Thousand Oaks, CA: SAGE.
- Hofstede, G., Hofstede, G. J., & Minkov, M. (2010). *Cultures and organizations: Software of the mind. Intercultural cooperation and its importance for survival*. New York: McGraw-Hill.
- Hooper, B. (1997). The relationship between pretheoretical assumptions and clinical reasoning. *American Journal of Occupational Therapy*, 51(5), 328-338.
- Hooper, B. (2007). Shortening the distance between the “I” and the “it”: A transformative approach to improving teaching. *Occupational Therapy in Health Care*, 21(1-2), 199-215.
- Hooper, B. (2008). Therapists' Assumptions as a Dimension Professional Reasoning. In B. A. Boyt Schell & J. Schell (Eds.), *Clinical and Professional Reasoning in Occupational Therapy* (pp. 13-35).
- Hooper, B., & Wood, W. (2002). Pragmatism and structuralism in occupational therapy: The long conversation. *American Journal of Occupational Therapy*, 56(1), 40-50.
- Hooper, B., & Wood, W. (2014). The philosophy of occupational therapy: A framework for practice. In B. A. Schell, G. Gillen, & M. E. Scaffa (Eds.), *Willard and Spackman's occupational therapy* (12th ed., pp. 35-46). Philadelphia: Lippincott Williams & Wilkins.
- Iwama, M. K. (2004). Revisiting culture in occupational therapy: A meaningful endeavor. *OTJR: Occupation, Participation & Health*, 24(1), 2-3.

- Iwama, M. K. (2006). *The Kawa model: Culturally relevant occupational therapy*. New York: Elsevier Health Sciences.
- Iwama, M. K. (2010). Cultural perspectives on occupation. In C. Christiansen & E. A. Townsend (Eds.), *Introduction to occupation: The art and science of living* (pp. 35-55). Upper Saddle River, NJ: Pearson.
- Iwama, M. K., Thomson, N. A., & Macdonald, R. M. (2009). The Kawa Model: The power of culturally responsive occupational therapy. *Disability & Rehabilitation*, 31(14), 1125-1135. doi:10.1080/09638280902773711
- Jungersen, K. (1992). Culture, theory, and the practice of occupational therapy in New Zealand/Aotearoa. *American Journal of Occupational Therapy*, 46(8), 745-750.
- Kempner, K. (1991). Understanding cultural conflict. In W. G. Tierney (Ed.), *Culture and ideology in higher education: Advancing a critical agenda* (pp. 129-150). New York: Praeger Publishers.
- Kielhofner, G. (2008). *A model of human occupation: Theory and application* (4th ed.): Lippincott Williams & Wilkins.
- Kielhofner, G. (2009). *Conceptual foundations of occupational therapy practice* (4th ed.). Philadelphia: FA Davis.
- Kincheloe, J. L. (2008). *Critical pedagogy primer* (2nd ed.). New York: Peter Lang.
- Kinébanian, A., & Stomph, M. (1992). Cross-cultural occupational therapy: A critical reflection. *American Journal of Occupational Therapy*, 46(8), 751-757.
- Kirsh, B., Trentham, B., & Cole, S. (2006). Diversity in occupational therapy: Experiences of consumers who identify themselves as minority group members. *Australian Occupational Therapy Journal*, 53(4), 302-313.

- Kluckhohn, F. R., & Strodtbeck, F. L. (1961). *Variations in value orientations*. Evanston, IL: Row, Peterson and Company.
- Knight, J. (2003). Updating the Definition of Internationalization. *International Higher Education. The Boston College Center for International Higher Education N*, 2, 33.
- Knight, J. (2004). Internationalization remodeled: Definition, approaches, and rationales. *Journal of Studies in International Education*, 8(1), 5-31.
- Kohlman Thomson, L. (2016). *Kohlman Evaluation of Living Skills* (4th ed.). Annapolis Junction, MD: AOTA.
- Kubow, P. K., & Fossum, P. R. (2007). *Comparative education: Exploring issues in international context* (2nd ed.). Upper Saddle River, NJ: Prentice Hall.
- Kuhn, T. S. (1970). *The Structure of Scientific Revolutions, 2nd enl. ed.*: University of Chicago Press.
- Lafayette Instrument Company. (2015). *Purdue pegboard test user instructions*. Lafayette, IN: Lafayette Instrument Company.
- Laliberte Rudman, D. (2013). Enacting the critical potential of occupational science: Problematizing the ‘individualizing of occupation’. *Journal of Occupational Science*, 20(4), 298-313.
- Laliberte Rudman, D., & Dennhardt, S. (2008). Shaping knowledge regarding occupation: Examining the cultural underpinnings of the evolving concept of occupational identity. *Australian Occupational Therapy Journal*, 55(3), 153.
- Lattuca, L. R., & Stark, J. S. (2009). *Shaping the college curriculum : Academic plans in context* (2nd ed.). Hoboken: Wiley.

- Law, M., Cooper, B., Strong, S., Stewart, D., Rigby, P., & Letts, L. (1996). The person-environment-occupation model: A transactive approach to occupational performance. *Canadian Journal of Occupational Therapy*, 63(1), 9-23.
- Leask, B. (2015). *Internationalizing the curriculum*. New York: Routledge.
- Lincoln, Y. S., & Guba, E. (1985). *Naturalistic inquiry* (Vol. 75). Newbury Park, CA: SAGE.
- Lincoln, Y. S., & Guba, E. (1986). But is it rigorous? Trustworthiness and authenticity in naturalistic evaluation. *New directions for evaluation*, 1986(30), 73-84.
- Lincoln, Y. S., & Guba, E. G. (2013). *The constructivist credo*. Walnut Creek, CA: Left Coast Press.
- Lincoln, Y. S., Lynham, S. A., & Guba, E. G. (2011). Paradigmatic controversies, contradictions, and emerging confluences revisited. In N. K. Denzin & Y. S. Lincoln (Eds.), *The SAGE handbook of qualitative research* (4th ed., pp. 97-128). Thousand Oaks, CA: SAGE.
- Lynham, S. A. (2000). Theory building in the human resource development profession. *Human Resource Development Quarterly*, 11(2), 159-178.
- Lynham, S. A. (2002). The general method of theory-building research in applied disciplines. *Advances in developing human resources*, 4(3), 221-241.
- Mahoney, F. I., & Barthel, D. W. (1965). Functional evaluation: The Barthel index *Maryland State Medical Journal*(14), 56-61.
- Masemann, V. L. (2013). Culture and education. In R. F. Arnone, C. A. Torres, & S. Franz (Eds.), *Comparative education: The dialectic of the global and the local* (4th ed., pp. 113-131). Lanham, MD: Rowman & Littlefield.

- McLaren, P. (2017). Critical pedagogy: A look at the major concepts. In A. Darder, R. Torres, & M. Baltodano (Eds.), *The critical pedagogy reader* (3rd ed., pp. 56-78). New York: Routledge.
- McSweeney, B. (2002). Hofstede's model of national cultural differences and their consequences: A triumph of faith-a failure of analysis. *Human Relations*, 55(1), 89.
- Merriam, S. B. (1991). How research produces knowledge. In J. M. Peters & P. Jarvis (Eds.), *Adult education* (pp. 42-65). San Francisco: Jossey-Bass.
- Merriam, S. B. (1998). *Qualitative research and case study applications in education*. San Francisco: Jossey-Bass Inc.
- Mezirow, J. (1991). *Transformative dimensions of adult learning*. San Francisco: Jossey-Bass.
- Mezirow, J. (1997). Transformative learning: Theory to practice. *New Directions for Adult and Continuing Education*, 1997(74), 5-12.
- Mezirow, J. (2018). Transformative learning theory. In K. Illeris (Ed.), *Contemporary theories of learning* (2nd ed., pp. 114-128). New York: Routledge.
- Monchinski, T. (2008). Critical pedagogy and the everyday classroom. New York: Springer.
- Morley, J., & Tumosa, N. (2002). Saint Louis University mental status examination (SLUMS). *Aging Successfully*, 12(1), 4.
- Morse, J. (2018). Reframing rigor in qualitative inquiry. In N. K. Denzin & Y. S. Lincoln (Eds.), *The SAGE handbook of qualitative research* (5th ed., pp. 796-817). Thousand Oaks, CA: SAGE.
- Nagarajan, S., & McAllister, L. (2015). Internationalisation of curriculum at home: Imperatives, opportunities and challenges for allied health education. *Journal of Teaching and Learning for Graduate Employability*, 6(1), 88.

- Nasreddine, Z. S., Phillips, N. A., Bédirian, V., Charbonneau, S., Whitehead, V., Collin, I., . . . Chertkow, H. (2005). The Montreal cognitive assessment, MoCA: A brief screening tool for mild cognitive impairment. *Journal of the American Geriatrics Society*, 53(4), 695-699.
- National Board for Certification in Occupational Therapy. (2018). *2018 OTR Curriculum Textbook and Peer-Reviewed Journal Report*. Retrieved from <https://www.nbcot.org/en/Educators/Educator-Resources>
- Nestle Nutrition Institute. (2019). MNA Mini Nutritional Assessment. Retrieved from <https://www.mna-elderly.com/default.html>
- Nguyen, P. M., Terlouw, C., & Pilot, A. (2006). Culturally appropriate pedagogy: The case of group learning in a Confucian Heritage Culture context. *Intercultural Education*, 17(1), 1-19.
- Nguyen, P. M., Terlouw, C., & Pilot, A. (2012). Cooperative learning in Vietnam and the West–East educational transfer. *Asia Pacific Journal of Education*, 32(2), 137-152.
- Nguyen, P. M., Terlouw, C., Pilot, A., & Elliott, J. (2009). Cooperative learning that features a culturally appropriate pedagogy. *British Educational Research Journal*, 35(6), 857-875.
- Palincsar, A. S. (1998). Social constructivist perspectives on teaching and learning. *Annual review of psychology*, 49(1), 345-375.
- Pallas, A. M. (2001). Preparing education doctoral students for epistemological diversity. *Educational Researcher*, 6-11.
- Parham, D., & Ecker, C. (2007). *Sensory processing measure manual*. USA: WPS.
- Parkinson, S., Forsyth, K., & Kielhofner, G. (2006). *A User's Manual for the Model of Human Occupation Screening Tool (MOHOST),(Version 2.0)*: Model of Human Occupation

- Clearinghouse, Department of Occupational Therapy, College of Health and Human Development Sciences, University of Illinois at Chicago.
- Pham, T. (2016). Student-centredness: Exploring the culturally appropriate pedagogical space in Vietnamese higher education classrooms using activity theory. *Australian Journal of Teacher Education*, 41(1).
- Pledger, C. (2003). Discourse on disability and rehabilitation issues: Opportunities for psychology. *American psychologist*, 58(4), 279.
- QSR International. (2018). NVivo 12 [Computer software] (Version 12.2.0.443): QSR International.
- Radomski, M. V., & Latham, C. A. T. (2014). *Occupational therapy for physical dysfunction*. Philadelphia: Lippincott Williams & Wilkins.
- Rawlins, J., & Alea, N. (Eds.). (2014). *Ageing in the Caribbean*. Florida, USA: Lifegate Publishing, L.L.C.
- Reed, K. L., & Hocking, C. (2013). Resituating the meaning of occupation: A transactional perspective. In M. P. Cutchin & V. Dickie (Eds.), *Transactional perspectives on occupation* (pp. 39-49). New York: Springer.
- Sakellariou, D., & Pollard, N. (2017). *Occupational therapies without borders: Integrating justice with practice* (2nd ed.). Edinburgh: Elsevier.
- Samoff, J. (2013). Institutionalizing international influence. In R. F. Arnone, C. A. Torres, & S. Franz (Eds.), *Comparative education: The dialectic of the global and the local* (4th ed., pp. 55-87). Lanham, MD: Rowman & Littlefield.
- Sandqvist, J. L., Törnquist, K. B., & Henriksson, C. M. (2006). Assessment of work performance (AWP)—development of an instrument. *Work*, 26(4), 379-387.

- Schein, E. H. (2004). *Organizational culture and leadership* (3rd ed.). San Francisco: John Wiley & Sons.
- Schell, B. A., Gillen, G., Scaffa, M., & Cohn, E. S. (2013). *Willard and Spackman's occupational therapy*. Philadelphia: Lippincott Williams & Wilkins.
- Schell, B. A. B., & Schell, J. W. (2008). *Clinical and professional reasoning in occupational therapy*. Philadelphia: Lippincott Williams & Wilkins.
- Schkade, J. K., & Schultz, S. (1992). Occupational adaptation: Toward a holistic approach for contemporary practice, part 1. *American Journal of Occupational Therapy*, 46(9), 829-837.
- Schugerenky, D. (2013). Higher education in the era of globalization: Toward a heteronomous model? In R. F. Arnove, C. A. Torres, & S. Franz (Eds.), *Comparative education: The dialectic of the global and the local* (4th ed., pp. 293-313). Lanham, MD: Rowman & Littlefield.
- Schwandt, T. A., & Gates, E. F. (2018). Case Study Methodology. In N. K. Denzin & Y. S. Lincoln (Eds.), (pp. 341-358). Thousand Oaks, CA: SAGE.
- Schwartzberg, S. L., Howe, M. C., & Barnes, M. A. (1982). *Groups: Applying the functional group model*. Philadelphia: FA Davis Company.
- Seelman, K. D. (2000). Rehabilitation science. *Technology and disability*, 12(2), 77.
- Sheridan, M. J., Bennett, S., & Blome, W. W. (2013). Cultural humility and shared learning as hallmarks for international teaching: The SWEP experience. *Social Work Education*, 32(6), 818-833.
- Spradley, J. P. (1980). *Participant observation*. Belmont, CA: Wadsworth.
- Stake, R. E. (1995). *The art of case study research*. Thousand Oaks, CA: SAGE.

- Stake, R. E. (2000). Case Studies. In N. K. Denzin & Y. S. Lincoln (Eds.), *Handbook of qualitative research* (2nd ed., pp. 435-455). Thousand Oaks, CA: SAGE.
- Stockdell, R., & Amella, E. J. (2008). The Edinburgh feeding evaluation in dementia scale: Determining how much help people with dementia need at mealtime. *The American Journal of Nursing*, 108(8), 46-54.
- Taylor, R. R. (2008). *The intentional relationship: Occupational therapy and the use of self*. Philadelphia: FA Davis.
- Thomas, E. (1997). Developing a culture-sensitive pedagogy: Tackling a problem of melding 'global culture' within existing cultural contexts. *International Journal of Educational Development*, 17(1), 13-26.
- Torraco, R. J. (2005). Writing integrative literature reviews: Guidelines and examples. *Human Resource Development Review*, 4(3), 356-367.
- Townsend, E. A., & Polatajko, H. J. (2007). *Enabling occupation II: Advancing an occupational therapy vision for health, well-being and justice through occupation*. Ottawa, Ontario: Canadian Association of Occupational Therapists.
- Townsend, E. A., & Polatajko, H. J. (Eds.). (2013). *Enabling occupation II: Advancing an occupational therapy, vision of health, well-being and justice through occupation* (2nd ed.). Ottawa, ON: CAOT.
- Trinidad and Tobago Occupational Therapy Association. (2018). Registered OTs - 2017. Retrieved from <http://www.ttota.com/registered-ots.html>
- Trompenaars, F., & Hampden-Turner, C. (2004). *Organizational culture and leadership* (3rd ed.). San Francisco: John Wiley & Sons.

- Trompenaars, F., & Hampden-Turner, C. (2012). *Riding the waves of culture: Understanding diversity in global business* (3rd ed.). New York: McGraw Hill.
- Uniform Data System for Medical Rehabilitation. (1998). *WeeFIM system clinical guide version 5.01*. Buffalo, NY: University of Buffalo.
- Uniform Data System for Medical Rehabilitation. (2014). The FIM® Instrument: Its Background, Structure, and Usefulness. Amherst, NY: UDSMR Buffalo.
- University of the Southern Caribbean. (2016). *Master of Science in Occupational Therapy*. Brochure. University of the Southern Caribbean.
- University of the Southern Caribbean. (2018a). Accreditation and affiliation. Retrieved from <https://usc.edu.tt/about-us/accreditation-and-affiliation/>
- University of the Southern Caribbean. (2018b). Mission, vision, and motto. Retrieved from <https://usc.edu.tt/about-us/usc-at-a-glance/mission-vision-motto/>
- University of the Southern Caribbean. (2018c). USC at a Glance. Retrieved from <https://usc.edu.tt/about-us/usc-at-a-glance/>
- University of the Southern Caribbean Master of Science in Occupational Therapy Program. (2016). *USC Learning Outcomes*. University of the Southern Caribbean.
- Van Damme, D. (2001). Quality issues in the internationalisation of higher education. *Higher Education*, 41(4), 415-441.
- Westergren, A., Lindholm, C., Mattsson, A., & Ulander, K. (2009). Minimal eating observation form: reliability and validity. *JNHA-The Journal of Nutrition, Health and Aging*, 13(1), 6-11.
- Whiteford, G. E., & Wilcock, A. (2000). Cultural relativism: Occupation and independence reconsidered. *The Canadian Journal of Occupational Therapy*, 67(5), 324-336.

- Wilcock, A. (2005). Occupational science: Bridging occupation and health. *Canadian Journal of Occupational Therapy*, 72(1), 5-12.
- Wilcock, A., & Hocking, C. (2015). *An occupational perspective of health* (3rd ed.): Thorofare, NJ : SLACK Incorporated.
- Willis, J. W., & Jost, M. (2007). *Foundations of qualitative research: Interpretive and critical approaches*. Thousand Oaks, CA: SAGE.
- World Federation of Occupational Therapists. (2008). Human resources project 2008. Retrieved from <http://www.wfot.org/ResourceCentre.aspx>
- World Federation of Occupational Therapists. (2016a). *Minimum standards for the education of occupational therapists*: World Federation of Occupational Therapists.
- World Federation of Occupational Therapists. (2016b). WFOT human resources project 2016. Retrieved from <http://www.wfot.org/ResourceCentre.aspx>
- World Federation of Occupational Therapists. (2019a). About. Retrieved from <https://www.wfot.org/about>
- World Federation of Occupational Therapists. (2019b). About Occupational Therapy. Retrieved from <https://www.wfot.org/about-occupational-therapy>
- World Health Organization. (2018a). Ageing and Health. Retrieved from <http://www.who.int/mediacentre/factsheets/fs404/en/>
- World Health Organization. (2018b). Disability and Health. Retrieved from <http://www.who.int/mediacentre/factsheets/fs352/en/>
- Yerxa, E. J. (1993). Occupational science: A new source of power for participants in occupational therapy. *Journal of Occupational Science*, 1(1), 3-9.

- Yerxa, E. J., Clark, F., Frank, G., Jackson, J., Parham, D., Pierce, D., . . . Zemke, R. (1989). An introduction to occupational science: A foundation for occupational therapy in the 21st century. *Occupational Therapy in Health Care*, 6(4), 1-17.
- Yin, R. K. (2014). *Case study research: Design and methods* (5th ed.). Thousand Oaks, CA: Sage.
- Young, M. F. (1993). Instructional design for situated learning. *Educational Technology Research and Development*, 41(1), 43-58.

APPENDIX A: STUDY TIMELINE

Month 1 November	Month 2 December	Month 3 January	Month 4 February	Month 5 March	Month 6 April	Month 7 May	Month 8 June	Month 9 July	Month 10 August
Immersion in USC OT Department Culture									
	Data Collection								
	Data Analysis								
		Teaching							
				Summary Analysis of Preliminary Data			Summary Analysis of Preliminary Data		
					Formalized Checking of Preliminary Findings with Participants			Formalized Checking of Preliminary Findings with Participants	
									Presentation of Preliminary findings to USC and Stakeholders

APPENDIX B: EDUCATOR INTERVIEW QUESTION GUIDE

Introduction

Thank you for agreeing to participate in this interview. I appreciate your willingness to spend a part of your day with me. I want to talk to you about your experience as an educator in the occupational therapy program here at USC or as an administrator that deals with the program. I am specifically interested in how the educators and administrators work to create a program that is suited to Trinidad and Tobago and the Caribbean while needing to use resources such as texts and models that are developed in other contexts. The World Federation of Occupational Therapists and other experts on education say that curricula should reflect and be suited to the local culture and context but there aren't any descriptions of the characteristics of a curriculum that does that. So, I am going to ask you a few questions about what a curriculum that is suited to specific context may look like to you and some of the challenges to and strategies for creating a program that meets the needs of a specific culture and context. I am also going to ask you some questions about your teaching; because culture and context influence everything we do including how we teach.

1. First, tell me a little about yourself and your background as an educator or administrator?
 - What is your position in the university?
 - How long have you been teaching in the department?
 - How long have you been teaching in general?
 - What courses do you teach?
 - What courses have you taught?
 - Are you an occupational therapist? How long have you been practicing?
 - What is your educational background?
2. Our own experiences in a particular culture and context influence our teaching. How do you see the connection between your experiences, beliefs, and assumptions and your teaching?
3. What are your main goals when teaching your class/classes?
 - How do you go about doing that? What are some strategies or approaches that you use?
 - Describe a typical class session? What do you do? What do the students do? What is the desired outcome?
 - How do you know when those strategies are effective?
4. To what degree do you believe a curriculum needs to reflect and address the local context in which it is located? What does that mean to you?
 - Do all resources and topics need to be directly related to the local context and culture?
 - What does it mean that a curriculum reflect and address the local context and culture?
5. What would a course that is responsive to the local culture and context look like to you?

- Describe a classroom curriculum that is responsible to and reflective of the local context and culture.
 - Describe how instructors/educators would actually go about situating the course curriculum in the local culture and context?
6. Are there specific ways in your teaching that you try to relate what the students are learning to Trinidad and Tobago?
 - Describe strategies you use to link what students are learning to the context and culture of Trinidad and Tobago and/or the Caribbean.
 - Describe an instance in your teaching when you and/or the students made clear links between the content and its relevance to Trinidad and Tobago or the Caribbean.
 - Describe a time when you found it difficult to integrate the culture and context of Trinidad and Tobago into your teaching.
 - What are some (other) challenges to ensuring that your classes and the curriculum are reflective of the culture and context of Trinidad and Tobago and the Caribbean?
 7. Tell me about the textbooks, assessment tools, models, and other resources you use in your class.
 - Are there ways it is obvious that these resources were created outside Trinidad and Tobago? Does that matter in your view? If so, how and why does it matter?
 - If the textbooks, resources, theories, or models are from another place, describe the strategies you use to make them relevant or useful for Trinidad and Tobago and the Caribbean.
 8. How do you feel the occupational therapy program as a whole reflects the culture and context of Trinidad and Tobago or the Caribbean?

APPENDIX C: DRAFT QUESTIONS FOR FACULTY INTERVIEW – EDUCATOR 6

Potential Interview Questions

Introduction

Thank you for agreeing to participate in this interview. I appreciate your willingness to spend a part of your day with me. I want to talk to you about your experience as an educator in the occupational therapy program here at USC or as an administrator that deals with the program. I am specifically interested in how the educators and administrators work to create a program that is suited to Trinidad and Tobago and the Caribbean while needing to use resources such as texts and models that are developed in other contexts. The World Federation of Occupational Therapists and other experts on education say that curricula should reflect and be suited to the local culture and context but there aren't any descriptions of the characteristics of a curriculum that does that. So, I am going to ask you a few questions about what a curriculum that is suited to specific context may look like to you and some of the challenges to and strategies for creating a program that meets the needs of a specific culture and context. I am also going to ask you some questions about your teaching, because culture and context influence everything we do including how we teach.

1. First, tell me a little about yourself and your background as an educator and fieldwork educator?
 - What is your position in the university?
 - How long have you been teaching in the department?
 - How long have you been teaching in general?
 - What courses do you teach?
 - What courses have you taught?
 - Are you an occupational therapist? How long have you been practicing?
 - What is your educational background?
2. What are your main goals when teaching your class/classes?
 - How do you go about doing that? What are some strategies or approaches that you use?
 - How do you know when those strategies are effective?
 - Describe a typical class session? What do you do? What do the students do? What is the desired outcome?
3. Our own experiences in a particular culture and context influence our teaching. How do you see the connection between your experiences, beliefs, and assumptions and your teaching?
 - Can you identify any specific values or beliefs related to teaching in the classroom or in the practice setting?
 - How does the context and culture of Trinidad and Tobago influence your teaching?

4. To what degree do you believe a curriculum needs to reflect and address the local context in which it is located? What does that mean to you?
 - Do all resources and topics need to be directly related to the local context and culture?
 - What does it mean that a curriculum reflects and addresses the local context and culture?
5. What would a course that is responsive to the local culture and context look like to you?
 - Describe a classroom curriculum that is responsible to and reflective of the local context and culture.
 - Describe how instructors/educators would actually go about situating the course curriculum in the local culture and context?
6. Are there specific ways in your teaching that you try to relate what the students are learning to Trinidad and Tobago?
 - Describe strategies you use to link what students are learning to the context and culture of Trinidad and Tobago and/or the Caribbean.
 - Describe an instance in your teaching when you and/or the students made clear links between the content and its relevance to Trinidad and Tobago or the Caribbean.
 - Describe a time when you found it difficult to integrate the culture and context of Trinidad and Tobago into your teaching.
 - What are some (other) challenges to ensuring that your classes and the curriculum are reflective of the culture and context of Trinidad and Tobago and the Caribbean?
7. Tell me about the textbooks, assessment tools, models, and other resources you use in your class.
 - Are there ways it is obvious that these resources were created outside Trinidad and Tobago? Does that matter in your view? If so, how and why does it matter?
 - If the textbooks, resources, theories, or models are from another place, describe the strategies you use to make them relevant or useful for Trinidad and Tobago and the Caribbean.
8. How do you feel the occupational therapy program as a whole reflects the culture and context of Trinidad and Tobago or the Caribbean?

APPENDIX D: EDUCATOR FOCUS GROUP #1 GUIDE

Potential Focus Group Questions

Thank you all for giving your time for this focus group. I know you all are incredibly busy, so I will use our time carefully. I have spoken to all of the faculty members individually about your perceptions of the characteristics of a course that is situated in a particular culture and context and your perceptions of how courses in this program are suited to the culture and context of Trinidad and Tobago and the Caribbean. Now, I want to concentrate on how a whole curriculum can be situated to a particular culture and context, what the characteristics of such a curriculum might be, and how the USC MSOT program is situated in the culture and context of Trinidad and Tobago and the Caribbean. I'm excited to bring you all together, because the power of a focus group is to bounce ideas off of each other and build and form new understandings together. So, I have some questions, but feel free to add your thoughts into the discussion.

1. What would you say is the collective goal or goals of the OT program as a whole? What is the desired outcome for students?
2. Education scholars and the WFOT state that a curriculum should be responsive to the local context, but don't say much about what that may look like. Ideally, what would a curriculum that is responsive to the local culture and context look like?
 - What would be done on a program level to ensure the program is responsible to and responsive to the local culture and context?
 - Describe what the requirements for students might be.
 - Describe what instructors might do as a whole to ground the curriculum in the local culture and context.
3. Is it important that a curriculum as a whole to designed to suit the specific needs of a particular location, culture, and context?
4. What do you feel is working well in this curriculum as far as creating a program that is situated in the culture and context of Trinidad and Tobago?
 - What strategies are being used on the program level to attempt to ensure the program is sensitive to the local culture and context?
5. What is not working so well?
6. What are the challenges to teaching an occupational therapy program that is specifically made for Trinidad and Tobago?
7. I see culture as a type of context. In our previous conversations, it seems that context is spoken of more often than culture. Some of the contextual issues brought up in the interviews were lack of resources, common health conditions in Trinidad and Tobago and the Caribbean,

and student background. How is the curriculum tailored to the context of Trinidad and Tobago?

8. How does the curriculum suited the culture of Trinidad and Tobago and the Caribbean?

APPENDIX E: STUDENT FOCUS GROUP #1 GUIDE

Introduction

Thank you all for agreeing to participate in this interview. I appreciate your willingness to spend a part of your day with me. I want to talk to you about your experience as a student in the occupational therapy program here at USC and specifically how you feel that the program relates to Trinidad and Tobago and the Caribbean. We know that it is important that curricula be relevant to the local culture and context. In fact, The World Federation of Occupational Therapists and other experts on education say that curricula should reflect and be suited to the local culture and context but there aren't any descriptions of the characteristics of a curriculum that does that. So, I am going to ask you a few questions about your experiences as a student to understand how this curriculum is situated in the local culture and context of Trinidad and Tobago and the Caribbean. Feel free to ask me questions as we go along if I am unclear. I will be recording this conversation and the audio will be transcribed. I will be using the information from you all and others to inform future questions and the results of this study. I may write notes while we are talking to remember main points or I may write some of what you all say on the white board to help us all visualize what we are saying.

1. In what ways do you see that this program is attempting to create a program that is reflective of and responsible to the culture and context of Trinidad and Tobago and the Caribbean?
 - What do your instructors do to link what you are learning to Trinidad and Tobago and the Caribbean?
 - Tell me about a time when an instructor did something that helped link what you were learning to Trinidad and Tobago or the Caribbean.
 - What does the program as a whole do to link what you are learning to Trinidad and Tobago and the Caribbean?
2. Do you think it is important that a program be situated in the local culture and context? What are the pros and cons?
3. Describe a time when you were learning something and it did not seem to fit in to the context of Trinidad and Tobago or the Caribbean?
4. Thinking now in an ideal situation: What would a program that is created to suit the needs of a particular culture and context look like to you? What would the features and characteristics be?
 - What would instructors do?
 - What would the overall design of the program look like? What activities or experiences would be required for students?

5. As I have observed some of your classes, I have noticed that many of the resources you use including textbooks assessment tools are from other places. Do you think that impacts your learning? How?
 - When you are reading a textbook, is it evident that it was written from the perspective of another context? If so, how?
 - How do you make such readings relevant to your context?
 - What do your teachers do to make the materials relevant?
6. It is often easier to see how context such as availability of resources or prevalence of certain health conditions impact a curriculum. Cultural context, however can be just as influential on a curriculum and on learning.
 - How is the culture of Trinidad and Tobago represented in the teaching in this program?
 - Are the instructional processes or activities used in this program representative of teaching in Trinidad and Tobago and the Caribbean?

APPENDIX F: QUESTIONS AND GUIDE FOR EDUCATOR FOCUS GROUP #2

Introduction

Describe what will happen in the focus group today. I want to get their feedback on what I have perceived as the main findings to my questions. I also want their input on how these factors work together and to talk about some broader issues/questions that are coming up.

- Introduce research questions.
- **Student Learning Needs**
 - Write on white board
 - Ask for a few of the main learning needs
 - Show NVivo Diagram (QSR International, 2018)
 - Get feedback
- **Learning Goals**
 - Curricular Level
 - Write on whiteboard
 - Similar to needs – Need to get outcomes from bulletin?
 - Show NVivo Diagram (QSR International, 2018)
 - Get Feedback
 - Course Level
 - Write on whiteboard
 - Many of these are the same
 - Need to get course objectives from syllabi?
 - Show NVivo Diagram (QSR International, 2018)
 - Get Feedback
- **Strategies**
 - Curricular level
 - Write on whiteboard
 - Show on Nvivo diagram (QSR International, 2018)
 - Course level
 - Write on whiteboard
 - Show on Nvivo diagram
- **Culture and context**
 - Draw on Whiteboard
 - Show context on NVivo diagram (QSR International, 2018)
 - Show culture NVivo diagram
 - Discuss – levels of culture

- **Linking strategies**
 - Show NVivo diagram (QSR International, 2018)
- **Limiting factors**
 - Show NVivo diagram (QSR International, 2018)
 - Mention that limiting factors also facilitate novel strategies
- **Facilitating factors**
 - Ask them to name some
- **Feedback on schematic**
- Draw concept map on Whiteboard getting feedback as go along.

Bigger questions:

- Is the goal of the program to prepare you for local practice only or for wider practice?
- The faculty has been taught outside of TT/Caribbean how does that influence how the program is situated in the local culture and context?
- Students seem to think that the way classes are taught were familiar and not that different from teaching in TT/Caribbean. Faculty see their teaching to be different from the more formal chalk and talk style. What do you think?
- What does a program starting in a place where OT is emerging need to be aligned in the local culture and curriculum?
- Students and faculty have said that the goal for the program is to teach to an international standard while teaching you all to apply it in a local context?
 - Do you agree?
 - How is this done?
 - What is the international standard?
 - Do all “international standards” apply?
- What is the influence of being in the context and culture of an SDA institution?
- What is local culture and context? Are their levels?

APPENDIX G: QUESTIONS AND GUIDE FOR STUDENT FOCUS GROUP #2

Introduction

Describe what will happen in the focus group today. I want to get their feedback on what I have perceived as the main findings to my questions. I also want their input on how these factors work together and to talk about some broader issues/questions that are coming up.

- Introduce research questions.
- Define context?
 - Review contextual factors that have come up.
 - Are there any more?
- Define culture.
 - Review cultural factors found in study.
 - Are there others?
- What are some of the limitations that prevent the program from being situated in the local culture and context?
 - Review limitations found in study.
- What are some of the facilitators that help the program to be situated in the local culture and context?
- What are some of the things you need to learn to be ready to practice?
 - Review student learning needs
- Is the purpose of this program to be ready to practice in TT/Caribbean or both?
- What are the program-wide goals?
 - Review program-wide goals?
- What are some course goals?
 - Review teaching goals?
- What strategies do instructors use to situate the course in TT/Caribbean culture and context?
 - Review strategies found in study.
- What strategies is used in the program as a whole to situate the course in TT/Caribbean culture and context?
- Draw concept map on Whiteboard getting feedback as go along.

Bigger questions

- Is the goal of the program to prepare you for local practice only or for wider practice?
- The faculty has been taught outside of TT/Caribbean how does that influence how the program is situated in the local culture and context?
- Students seem to think that the way classes are taught were familiar and not that different from teaching in TT/Caribbean. Faculty see their teaching to be different from the more formal chalk and talk style. What do you think?
- What does a program starting in a place where OT is emerging need to be aligned in the local culture and curriculum?

- Students and faculty have said that the goal for the program is to teach to an international standard while teaching you all to apply it in a local context?
 - Do you agree?
 - How is this done?
 - What is the international standard?
 - Do all “international standards” apply?
- What is the influence of being in the context and culture of an SDA institution?

APPENDIX H: FIELDWORK EDUCATOR INTERVIEW GUIDE

Thank you for agreeing to speak with me today. Just to provide a little background about the study, I am conducting a study for my PhD at Colorado State University in the U.S. I am interested in understanding how an occupational therapy program implements a program that is situated in the local culture and context. That means that it is relevant and responsible to the values, beliefs, and situations of a particular place. You may not know specifically all the things that the USC program is doing to make the program relevant to Trinidad and Tobago and the Caribbean, but as fieldwork educators, you may have a unique perspective on what students need to know about the local culture and context to practice and you may see them applying knowledge of the culture and context in practice. So, I'll ask you a few questions to get your point of view. Feel free to ask me questions and to just let me know if something pops up that you want to tell me.

- Describe your approach to supervising occupational therapy students. Is there a philosophy or thought process that drives how you supervise or teach them?
- What beliefs or values drive how you work with the occupational therapy students?
- What do you think occupational therapy students need to understand to be great occupational therapists in Trinidad and Tobago and the Caribbean?
- If needed – What do OT students need to understand about the culture or context of Trinidad and Tobago or the Caribbean to be great therapists here?
- In what ways do you see culture and context influence practice? How do students learn to understand this influence of culture and context?
- Are there times when students' beliefs and values (culture) is different from those of the client or you? How do they manage these differences or learn to manage these difference?
- What contextual factors do students need to be ready to deal with when they are on fieldwork or when they become practitioners?
- Describe a time when a student actively considered the local culture or context in a therapeutic encounter.
- Do you see evidence of the students' actively drawing from and responding to the local culture or context? For example, creating a home exercise program or creating a therapeutic activity that is designed considering the particular cultural or contextual situation.

APPENDIX I: FIELDWORK EDUCATOR INTERVIEW GUIDE, REVISED

Thank you for agreeing to speak with me today. Just to provide a little background about the study, I am conducting a study for my PhD at Colorado State University in the U.S. I am interested in understanding how an occupational therapy program implements a program that is situated in the local culture and context. That means that it is relevant and responsible to the values, beliefs, and situations of a particular place. You may not know specifically all the things that the USC program is doing to make the program relevant to Trinidad and Tobago and the Caribbean, but as fieldwork educators, you may have a unique perspective on what students need to know about the local culture and context to practice and you may see them applying knowledge of the culture and context in practice. So, I'll ask you a few questions to get your point of view. Feel free to ask me questions and to just let me know if something pops up that you want to tell me.

- Describe your approach to supervising occupational therapy students. Is there a philosophy or thought process that drives how you supervise or teach them?
- What beliefs or values drive how you work with the occupational therapy students?
- What do you think occupational therapy students need to understand about the culture and context of Trinidad and Tobago to be great occupational therapists here or in the Caribbean?
- If needed – What do OT students need to understand about the culture or context of Trinidad and Tobago or the Caribbean to be great therapists here?
- In what ways do you help students understand how culture and context influence practice in your setting?
- In what ways do you see culture and context influence practice? How do students learn to understand this influence of culture and context?
- Are there times when students' beliefs and values (culture) is different from those of the client or you? How do they manage these differences or learn to manage these difference?
- What contextual factors do students need to be ready to deal with when they are on fieldwork or when they become practitioners?
- Describe a time when a student actively considered the local culture or context in a therapeutic encounter.
 - Do you see evidence of the students' actively drawing from and responding to the local culture or context? For example, creating a home exercise program or creating a therapeutic activity that is designed considering the particular cultural or contextual situation.

APPENDIX J: QUESTIONS FOR OCTH STUDENTS – PART I

TITLE OF STUDY: The barriers to and strategies for situating a new occupational therapy education program in its local culture and context: A case study

PRINCIPAL INVESTIGATOR: Barb Hooper, PhD, OTR, FAOTA
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CO-PRINCIPAL INVESTIGATOR: Bill Roberts
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Questions for OCTH 523 Students – Part 1

Thank you for taking time to answer these questions for Bill Roberts' study. The intention of these questions is to gain understanding of how an educator from outside of Trinidad and Tobago influences the students' experiences of the curriculum as situated in the local culture and context.

Please answer the questions below. After you are finished, a student or faculty member other than Mr. Roberts will collect your answers and take them to Dr. Chand's office to be placed in locked storage. Mr. Roberts will not have access to the responses until after final grades are posted. At that time he will read them and may ask to hold a focus group to ask further questions. So that your answers will be anonymous, do not put your names on your responses. If you need more space, please continue your answers on the back of the page.

1. What are some of the instructional processes or teaching activities that Bill Roberts uses in Community-Based Occupational Therapy I? (For example these could be lecture, group activities, discussion, etc.)
 - To what degree are these instructional methods familiar to you from your prior educational experiences?
 - How are the instructional methods different from your prior educational experiences?
2. How would you describe Mr. Roberts' *style of teaching*? (For example, formal, informal, participatory, structured, unstructured) Explain.
 - Was this style familiar to you from your prior educational experiences?
 - In what ways are they familiar and in what ways are the unfamiliar?
3. In what ways does Mr. Roberts' style and methods fit the Trinidad and Tobago and Caribbean education context? In what ways is it out of sync with this context?

APPENDIX K: QUESTIONS FOR OCTH 523 STUDENTS – PART 2

TITLE OF STUDY: The barriers to and strategies for situating a new occupational therapy education program in its local culture and context: A case study

PRINCIPAL INVESTIGATOR: Barb Hooper, PhD, OTR, FAOTA
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CO-PRINCIPAL INVESTIGATOR: Bill Roberts
PhD Student
Department of Occupational Therapy
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Questions for OCTH 523 Students – Part 2

Thank you for taking time to answer these questions for Bill Roberts' study. The intention of these questions is to gain understanding of how an educator from outside of Trinidad and Tobago influences the students' experiences of the curriculum as situated in the local culture and context.

Please answer the questions below. After you are finished, a student or faculty member other than Mr. Roberts will collect your answers and take them to Dr. Chand's office to be placed in locked storage. Mr. Roberts will not have access to the responses until after final grades are posted. At that time he will read them and may ask to hold a focus group to ask further questions. So that your answers will be anonymous, do not put your names on your responses. If you need more space, please continue your answers on the back of the page.

1. What way of learning is most comfortable for you? Is it lecture, small group activities, hands on, discussion, or another approach?
2. Describe the way you learn best. This may be different from the way that is most comfortable for you to learn. Describe a time when you felt the teaching approach worked really well for you.
3. In your opinion, does the content, or what Mr. Roberts teaches in his class relate to Trinidad and Tobago and the Caribbean? Why or why not?
4. Does Mr. Roberts link the topics of his classes to Trinidad and Tobago and the Caribbean? If so, how?
5. Has Mr. Roberts done and said things in class that have seemed "weird" to you, different, odd? If so, what were they? Did those "odd" things influence your learning in the class, if so, how?
6. Do you think that it is possible for a program that is attempting to be responsive to the culture and context of Trinidad and Tobago and the Caribbean to use an instructor that is not from here? Explain.

- a. If it is possible, is there anything that outside educators need to do or that the local program leaders need to do to ensure the program remains relevant to the local culture and context?

APPENDIX L: WRITTEN QUESTIONS FOR 2ND YEAR STUDENTS

After talking to you all, faculty, administrators, and fieldwork educators, I have a few follow-up questions for you all. Thank you for responding to the following questions. Please let me know if you have any questions. **Please email your responses to me by October 7, 2018.**

The faculty and you as students identified several contextual factors that influenced the OT curriculum. Some of those are a) occupational therapy is a new profession in Trinidad and Tobago and the Caribbean, b) lack of resources, c) lack of occupational therapists in the country, and d) lack of local data.

Related to these contextual factors, you and faculty identified certain student learning outcomes. Some of these outcomes are a) being able to work with limited resources, b) being advocates for the profession and for clients, and c) developing critical thinking skills. I would like to get your thoughts on how the program addresses these outcomes.

1. Advocacy

Repeatedly educators and students have stated that practitioners need to be advocates. **Please give specific examples of activities, assignments, or processes that you have participated in that develop your advocacy skills.**

2. Limited Resources

Educators have brought up that due to the contextual factor of lack of resources, students will need to be able to practice with limited resources. **Give specific examples of activities, assignments, or processes that you have participated in that help you learn how to practice with limited resources.**

3. Critical Thinking

Faculty have stated that one of their goals is that students develop critical thinking skills. Critical thinking is the ability carefully analyze a situation given various sources of information and to make a decision based on the all the information available. **What activities, assignment, or processes have you been a part of that have helped you develop your critical thinking skills?**

4. Service Learning

Through interviews and focus groups, it was clear that service learning was an important way that the faculty connected what you were learning in class with the culture and context of Trinidad and Tobago and the Caribbean. It was less clear exactly how culture and context is connected to your service learning experiences. **Give examples of specific assignments, activities, or processes that you participated in that helped connect the culture or context of Trinidad and Tobago and the Caribbean.**

5. Assignments

Describe some times when you were given an assignment that caused you to connect what you were learning to the culture or context of Trinidad and Tobago or the Caribbean?

6. Layers of culture

Several students and faculty have brought up there are several layers of culture that influence the OT department such as the culture of the student cohorts, the faculty culture, the USC culture, and the OT culture in Trinidad and Tobago. Students and faculty have stated that the first cohort of students represent a specific ethnicity and perhaps socioeconomic group as compared to the current OT professional culture in Trinidad and Tobago. There was a question about how the OT program and faculty was addressing the issue.

Describe the layers of culture as you experience them as a student in the OT department at USC.

Describe ways the occupational therapy department and faculty have addressed the various layers of culture and context that may influence the students, faculty, fieldwork educators and OT practitioners involved with the USC OT program.

Describe how you see your culture and context reflected in this program.