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Rodney J. Uphoff
Elwood Thomas Missouri Endowed Professor Emeritus of Law
Director, University of Missouri South African Education Program
University of Missouri
School of Law
213 Hulston Hall
Columbia, MO 65211

Dear Professor Uphoff:

This letter is to serve as a report on the UMSAEP Academic Exchange Visit, including a presentation at the 2018 World Federation Occupational Therapy (WFOT) Congress in Cape Town, South Africa from May 21-25.

I would like to thank you again for the opportunity to collaborate with my colleagues, Prof. Jo-Celene de Jongh and Prof. Lisa Wegner, from the Department of Occupational Therapy at the University of Western Cape. The aim of the project was to explore student occupational therapists' perceptions and experiences of ethical dilemmas within the countries of South Africa (SA) and the USA, and to explore the value of sharing their perceptions with, and learning from, other students' experiences. The objectives of the project were to:

- 1. Develop and implement an online international ethics module;
- 2. Explore occupational therapy students' perceptions and experiences of ethical dilemmas within two countries;
- 3. Explore cross-cultural issues in ethics that arise in occupational therapy;
- 4. Evaluate the module to determine the students' perceptions of the value of the module

My visit to South Africa corresponded with the international WFOT Congress held in Cape Town in May 2018. The Congress was an international success where people came from all over the world to be in attendance. Occupational therapists, speakers, panelists, poster presenters, students, volunteers, friends and colleagues alike came together in unison to share in the experience of what was *Connected in Diversity: Positioned for Impact*. The congress statistical outcomes included:

Delegates in attendance = **2000**

Number of sponsors and exhibitors = 29

Number of presenters: 1150

Number of pre-congress workshops: **10** Number of in-congress workshops: **13**

Number of oral sessions: 71

Number of guided poster sessions: **10** Number of standard posters: **800**



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Our presentation was one of the 71 oral sessions accepted for the program. The details of that presentation are outlined below:

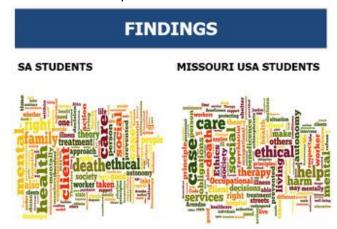
Title: Occupational Therapy Students' Perspectives of Ethics in Two Countries: South Africa and the United States of America.

Introduction: Worldwide, health professions students including occupational therapy (OT), typically undergo ethics training. Training strives to facilitate students' critical thinking, objective analysis and clinical reasoning skills to produce impartial, unbiased decisions in different contexts with diverse populations.

Objectives/Aims: 1) Describe how OT students perceive a contextually complex ethical dilemma 2) Compare ethical perceptions of OT students trained in different cultural contexts.

Method: This descriptive qualitative study sought to describe the students' perceptions of ethical conduct through participation in an online international ethics module. Purposeful sampling was undertaken. Data was collected from students' analyses of a case study engaging them in an ethical reasoning process to determine societal obligation to prevent harm. Data was analyzed thematically resulting in the following themes: 1) Steps of Ethical Reasoning; 2) Cross Cultural Issues; 3) Application of Theory; 4) Intersection of Law and Ethics. The study conformed to all the ethics guidelines set by the relevant committees of the University of the Western Cape and the University of Missouri.

Results: Students experienced different cross-cultural issues which influenced their ethical judgments. While many meta-ethical constructs were consistent amongst groups, there continues to be variability regarding ethical duties associated with OT practice.



Conclusion: There is a need amongst educators to identify, share and discuss similarities and differences in how OT practitioners address ethical issues, using the ethical reasoning process as a guide. The international OT community needs to further the profession's meta-ethical discourse in order to guide clinical application within a diverse and globally connected workforce.





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Continued Collaboration

As noted in the word clouds depicted as findings, autonomy is present in both clouds, but depicted much larger and bolder with the MHPC students. This is consistent with a principles based approach utilized by most of the US students. The theory of Biomedical Ethics is the most prevalent ethical theory used to teach clinical ethics in the US and also guides development of the AOTA Code of Ethics. With regard to the Rebecca case, which relayed the story of a woman with mental illness who died of exposure after declining recommended medical procedures, most students identified conflicts related to respect for autonomy. Conflicts ranged in principle conflicts between autonomy and beneficence to autonomy and organizational ethics or systems level barriers. For the SA students deontological themes, including autonomy and harm reduction were present, but there was also prominent representation of consequential arguments including utility based arguments. Other highlighted findings of interest include that reference to family and utility related to promoting community health over individual rights was more prevalent with UWC. While this could be attributed to the pedagogical biases of the instructors it may also signify the influence of cultural differences between groups.

What is potentially more interesting than the differences, are the similarities in ethical reasoning. In both student cohorts, the strongest ethical theme is care. This is consistent with other research that shows clinicians primarily use an Ethic of Care approach and are more relationship oriented during decision making even when trained in a deontological model. This insight may help us to better create clinical ethics curriculum that accounts for a care model which is most relevant to clinical practice.

Over the course of the last several months this study, including these findings and implications for educational programming, has been the basis of an article that will be submitted for publication in fall 2018. In addition, as the incoming Director of the MU Center for Health Ethics I have developed an Ethics ECHO grounded in sensemaking properties and our colleagues from South Africa have been invited to continue our collaboration within that project as well, which seeks to translate ethics training into behavioral outcomes of clinicians. Again, I thank you for the opportunity to engage in international research partnerships, which contribute to our clinical communities and global health initiatives.

Sincerely,

Lea Brandt, OTD, MA, OTR/L

Executive Director, Missouri Health Professions Consortium

Faculty, MU Center for Health Ethics