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Evolution of Occupational Therapy Practice: Life History of Dr. Charlotte Royeen, PhD, OTR/L,

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### **Abstract**

The purpose of this life-history study was to provide current and future generations of occupational therapists a view of the history and how occupational therapy practice has evolved through the lens of Dr. Charlotte Royeen. This study aimed to understand how Dr. Charlotte Royeen's experiences and service has influenced the occupational therapy profession. The methodology used was a semi-structured interview conducted by two student researchers with the participant, Dr. Royeen. Data were analyzed through transcription and coding. Three categories emerged from coding: personality, professional development and occupational therapy. The researchers concluded a final assertion that is as follows: As a forward thinker and strong self-advocate, Dr. Royeen is mindful in making decisions and is willing to embrace adversity to advance occupational therapy practice and education.

### **Introduction**

This life history is one of 30 life history interviews, which are part of a larger project, *Histories of Individuals Who Have Been Influential in Developing Occupational Therapy (OT) at the National Level and Beyond*. The purpose of the study is to provide current and future generations of occupational therapists a view of the history and how occupational therapy practice has evolved from its inception to current practice through the life history stories of occupational therapists who have held leadership roles at the national level and beyond. It is anticipated that the life history process will be a powerful way to gather this information.

Two occupational therapy students from the University of North Dakota (UND), who are novel researchers, interviewed their participant, Dr. Charlotte Royeen, for approximately two hours. The researchers conducted the interview via Zoom Video Conferencing. During the interview, the researchers were set up in a quiet, distraction-free conference room in the School of Medicine and Health Sciences at UND. Their participant, Dr. Royeen, was video conferencing from her quiet office located at Rush University, College of Health Sciences. Topics discussed included Dr. Royeen's childhood, education, experiences and career as an occupational therapist.

### **Theory**

The Kawa model guided this qualitative research study. The Kawa Model is a conceptual model that uses a metaphor of a river to represent one's life flow (Lape, Lukose, Ritter, & Scaife, 2018). The structures within the river impact the river's flow, just as an individual's environment and life circumstances can affect one's life flow. In regards to the river metaphor that is the core of the Kawa Model, the river structures represent aspects within an individual's life: driftwood (assets and liabilities); rocks (life circumstances); and walls and bottom (environment) (Lim, & Iwama, 2011). The Kawa model was an appropriate model to guide this qualitative research

study because it enabled Dr. Charlotte Royeen to express her life narrative and reflect on the interactions between her social and physical environment, life circumstances, assets, and liabilities (Lape et al., 2018).

### **Literature Review**

To understand an individual's subjective experience and values within their own life, a timeline interview can be used to obtain such information (Adriansen, 2012). This type of tool was used in conjunction with a curriculum vitae (CV) review to gain a deeper understanding of Dr. Charlotte Royeen's life history.

The profession of occupational therapy has been around since 1910 and, over the course of the next 50 years, began a slow climb to becoming more prominent and recognized within the health care system (Metzler, n.d.). This led to a pattern of limited job openings for newly graduated occupational therapists. During the 1970s and 1980s, the American Occupational Therapy Association (AOTA) began to push for occupational therapy to expand into more areas. There was still a limited amount of job openings; however, new job opportunities in settings such as home health, long-term care, and other outpatient settings started to emerge (Metzler, n.d.).

In regards to the progression of educational requirements for occupational therapists, it dates back to 1915 when Eleanor Clark Slagle, developed the first professional school for occupational therapists (St. Catherine University Online OTA, 2017). Occupational therapy programs were formally accredited in 1935 and by the 1970s, all occupational therapy programs were at a minimum a baccalaureate level (Brown, Crabtree, Mu, & Wells, 2015). In 1999 ACOTE issued the requirement for all OT programs to become compliant and accredited to a post-baccalaureate level by 2007 (Metzler, n.d.). In 2014, AOTA outlined a position statement that supported the transition to entry-level OTD education by 2025 (Brown et al., 2015). One of

the reasons addressed for the transition was so that occupational therapy was able to stay competitive and relevant to other health care professionals (Brown et al., 2015). However, in 2015 ACOTE concluded that during that present time, occupational therapy programs would remain at both the masters and the doctoral level (Brown et al., 2015).

### **Participant Description**

Dr. Charlotte Royeen is a highly successful woman with a strong work ethic, enthusiasm, and many accomplishments. The following information was obtained via web search and review of her curriculum vitae (CV). Dr. Royeen is currently the Dean of the College of Health Sciences and Professor of Occupational Therapy at Rush University Medical Center in Chicago, Illinois. In the small amount of free time Charlotte has, she enjoys walking, gardening, collaging, spending time with her husband and dog, as well as her two grown children. Dr. Royeen puts great value in her work and considers her job as her passion and joy. She has published 40 books and book chapters and 75 journal articles (Rush University, 2019). Starting from when she was young, in seventh grade, her mom encouraged her to serve others in any way possible. Dr. Royeen has since adopted that mentality and used it to advance the practice of occupational therapy (OT) and make a difference in the world around her.

In 1976, Charlotte graduated with a Bachelor of Science: Summa Cum Laude with areas of concentration in occupational therapy and anatomy. When she graduated, there were not many job opportunities, but she found an occupational therapist job in a pediatric setting - evaluating and treating children aged six through eighteen years with multiple disabilities. Charlotte then continued to advance her education and, in 1980, graduated with her Master of Science in Occupational Therapy, as a graduate teaching fellow, with areas of concentration in occupational therapy, research, and neuroscience.

In 1986 at Virginia Polytechnic Institute and State University, Dr. Royeen received her Doctorate of Philosophy with an area of concentration in educational research and evaluation, as well as statistics with a minor in management. In her current position as Dean, Dr. Royeen has recently received two awards recognizing her special excellence as an academic leader in the biomedical sciences: the A. Watson Armour III and Sarah Armour Presidential Professor at Rush awards (Rush University, 2019).

Per the CV review, Dr. Royeen has held multiple positions at the national level, serving the American Occupational Therapy Association (AOTA) from 1998 until 2014. Her positions included: Chair-Elect; Education Special Interest Section, Chairperson; American Journal of Occupational Therapy, Ad hoc Reviewer; Commission of Education, Chairperson-Elect; Commission on Education, Chairperson; Board of Directors, Director. In 2002, Dr. Royeen was awarded the Eleanor Clarke Slagle Lectureship Award, the highest scholarly award that is presented by AOTA. Dr. Royeen delivered her lecture *Chaotic Occupational Therapy: Collective Wisdom for a Complex Profession* in 2003.

## **Methodology**

### **Study Design**

The design used for this study was qualitative, using a life history approach. A life history approach is used to explore and identify how an individual's experiences, attitudes, and behaviors influence the course of their life (Hagemaster, 1992). This approach allowed the focus to be on the participant's involvement in the evolution of occupational therapy practice.

### **Participant Selection**

The participant was selected from a participant list compiled through purposive sampling by the project directors. Informed consent was obtained before the interview and the UND

Institutional Review Board reviewed the project and because of the study design, the formal IRB process was waived.

### **Interview Schedule**

The semi-structured interview was guided by an interview schedule prepared by the project directors; the questions on the interview schedule were designed to be used with all the individuals interviewed as part of the larger project. The student researchers were allowed to modify or add interview questions as needed for each specific interview.

### **Data Collection**

The data collection consisted of multiple methods. The researchers worked diligently to coordinate a time with Dr. Royeen's assistant to determine a time for the interview. Once an interview time was established, the researchers conducted a google search of "Dr. Charlotte Royeen" as well as obtained her CV via email. The google search and CV were used to gather background information and previous educational professional experiences of Dr. Royeen.

Following the brief background review, a two-hour semi-structured interview was conducted via video conferencing. The entirety of the interview was recorded and transcribed verbatim by the researchers. Also, Dr. Royeen provided pictures of personal and professional artifacts via email to enhance the items she values in her life.

### **Trustworthiness**

Several specific techniques were used to establish the trustworthiness of the study: reflexive journaling, data collection triangulation, member checking, two researchers and an advisor, research notes, debriefing and member checking. These techniques were used to enhance the understanding of the study, as well as contribute to the validity and reliability of the study.



Reflexive journaling was done by both researchers throughout the entire process of this study. This helped the researchers to eliminate personal biases and reflect on the multiple steps in the process. Multiple data collection methods were used, contributing to triangulation and increasing both reliability and validity of the study. Member checking was done by emailing copies of the poster presentation and transcription to Dr. Royeen, before publishing it. Research notes were kept throughout the research process to use during the final steps to ensure the accuracy of information that is being presented. All of the aforementioned techniques contribute to reliability and validity by confirming the consistency and accuracy of information.

### **Data Analysis**

The data analysis process involved the student researchers listening and transcribing the audio recordings of the interview verbatim. During the coding process, there was a total of 18 codes formed, which were then collapsed into three categories. The six themes that emerged from the categories were a reflection of Dr. Royeen's assets and liabilities, life circumstances, and environment – all of which had significantly contributed and continue to contribute to her career as an occupational therapist.

For the initial stage of the coding process, the student researchers had two printed copies of the interview transcription. The transcription was reviewed, and statements were directly taken out of the interview transcription and labeled with a word or phrase, otherwise known as a code, that depicted the meaning of the statement. Once each statement that Dr. Royeen made during the interview was labeled, the student researchers discarded any statements that held no relevance to the research purpose. There were additional statements excluded from the coding process to ensure the discretion of Dr. Royeen's stance regarding sensitive topics within the

occupational therapy profession. The codes, categories, themes, sub-assertions and final assertions can be found in the visual data display, located in the appendix.

The student researchers utilized the Kawa model to guide the data analysis process. The codes that were developed were considered to be the river structures of driftwood, bottom, and walls and riverbank, which are representative of assets and liabilities, life circumstances, and environment (Lim, & Iwama, 2011). The student researchers were then able to form the categories by identifying the interactions and contributions of the “river structures” and how this might have impacted Dr. Royeen’s life flow.

### **Findings and Results**

Dr. Charlotte Royeen has held several leadership positions since she began her career in occupational therapy. Charlotte’s ability to quickly recognize barriers that inhibit successful flow within her life has allowed for accomplishment of many aspirations of hers. Harmony and balance have remained relatively consistent in her work, due to her value put in serving others as a group, and not focusing on herself as an individual (Lim, & Iwama, 2011).

Following transcription, the coding process began. Once the 18 codes were identified during the initial stage of the coding process, the student researchers organized the codes into three categories. The three categories developed were personality, professional development, and occupational therapy. There were five codes in the personality category, ten codes in the professional development category, and three codes in the occupational therapy category. There were then two themes that emerged from each category. Lastly, all of the information was assembled to create an assertion and sub-assertion. A more detailed description of each category and theme has been provided below.

#### **Personality**

The themes associated with this category are: (1) Dr. Royeen displayed an immense amount of self-awareness regarding her personal and professional weaknesses and strengths and, (2) Dr. Royeen is highly understanding of other people's differences because she puts great value on individuality. When asked about characteristics that enhance her self-concept, she reported, "I am naturally very outgoing, and I have had to learn both in practice and with people to adapt my style to meet their needs." Dr. Royeen's self-awareness was evident in her justifications for decisions made throughout her professional career. A specific example of this was when asked how she decided what occupational therapy program to attend. Dr. Royeen's response was, "I actually had enough insight into myself to know I should not go to a cutting edge program, but I should go to a traditional program. I knew I'd never been traditional so I had to know what it was in order to go beyond it."

### **Professional Development**

The themes developed for this category are: (1) Starting from a very young age, service has been the driving force to Dr. Royeen's accomplishments, and (2) Dr. Royeen has had to make many sacrifices to accomplish the goals she has set for herself; however, she made it clear that her work is her passion. Dr. Royeen's mother was very influential in her life and explained, "I was raised where service is a part of what you do. My mother trained me as a volunteer early on, and it's always an expectation." Personally, Dr. Royeen has made several sacrifices in regards to life outside of her career. Charlotte reported, "I had a full-time live-in nanny for 25 years. Plus, my husband and I have been married for over 40 years, so I've been able to do this because I had a co-wife and co-mother."

### **Occupational Therapy**

The themes developed for this category are (1) Dr. Royeen expressed the need to clearly define differences in scope of practice among OTA, MOT, and OTD, and (2) Dr. Royeen has experienced much adversity and has capitalized on her interpersonal skills to overcome it. Dr. Royeen emphasized the value and importance of the transition from a master's level to an entry-level doctorate. She "The OTD is the only thing that's going to help the field move forward and give us a place, as a profession, as a research enterprise in health and human services."

Throughout her professional career, Dr. Royeen's difficult experiences have led her to where she is today. When asked about these difficult times, she reported, "It also means that you have to go through a lot of pain and agony as you grow and learn. I've made a lot of mistakes along the way. I've had periods of time where it's been endless days upon days of feedback about what I didn't do right and how incompetent it is." She reiterated her sense of self-concept when she explained how some people might never get over those things, but she did with resilience.

### **Assertion and Sub Assertion**

A final assertion and sub-assertion were formulated from the previously described themes that are representative of Dr. Royeen's life flow throughout her professional career. The final assertion is: As a forward thinker and strong self-advocate, Dr. Royeen is mindful in making decisions and is willing to embrace adversity to advance occupational therapy practice and education. The sub-assertion is: She is supportive of moving entry-level occupational therapy practice to the doctorate level.

### **Discussion and Conclusion**

As the occupational therapy profession is complex and continually changing, Dr. Charlotte Royeen has remained mindful and willing to embrace diversity. Throughout her life,

Dr. Charlotte Royeen draws upon several personal assets to overcome challenges that she is faced with (Lim, & Iwama, 2011). Finding harmony through the chaos of life helps Dr. Royeen remain forward in her thinking and effective in occupations.

Consistent with the time period, after graduating from Tufts University in 1976, she experienced difficulty finding a job within the profession, taking up to 6 months before she found a substitute job in a pediatric setting. Dr. Royeen was always one step ahead, receiving her master's degree in 1980 before AOTA even required all OT programs to be at the post-baccalaureate level. This proactivity stems from her desire and belief that for the profession to stay relevant and competitive, it has to keep up with the advancing educational requirements of other healthcare professions. She continues to voice this belief by advocating for the profession to move to the clinical doctoral level.

The story of Dr. Royeen's journey demonstrates the ever-changing world and the flow of life. The Kawa model uses a river metaphor to provide an explanation of one's life flow and how interactions with river structures can have positive and negative effects. Just like a river's flow is impacted by driftwood, rocks, and the river walls and bottom, Dr. Royeen's life flow was greatly influenced by her personality, life circumstances, and by the profession of occupational therapy as a whole. Dr. Royeen has shown a consistent, unending passion and dedication to the field of occupational therapy by holding leadership and serviceship positions. The findings from this life history study have the potential to add to the profession's body of knowledge by viewing the evolution of OT practice through the lens of Dr. Royeen.

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**Appendix A**

**Visual Data Display**

<p align="center"><b>Life History of Dr. Charlotte Royeen: A Qualitative Study Hope Nelson, OTS, &amp; Vanessa Johnson, OTS</b></p>			
<p align="center"><b>Codes</b></p>	<ul style="list-style-type: none"> <li>· Unapologetically herself</li> <li>· Being self-aware</li> <li>· Different kind of brain</li> <li>· Dog</li> <li>· Leisure</li> </ul>	<ul style="list-style-type: none"> <li>· Higher education</li> <li>· Her education</li> <li>· Family/childhood influence</li> <li>· Professional influence</li> <li>· Scholarly service</li> <li>· Leadership</li> <li>· Visionary</li> <li>· Environment</li> <li>· Service</li> <li>· Work</li> </ul>	<ul style="list-style-type: none"> <li>· Professional differences within occupational therapy</li> <li>· Transition to the OTD</li> <li>· History repeats itself</li> </ul>
<p align="center"><b>Categories</b></p>	<p align="center"><b>Personality</b></p>	<p align="center"><b>Professional Development</b></p>	<p align="center"><b>Occupational Therapy</b></p>
<p align="center"><b>Themes</b></p>	<p>Dr. Royeen displayed an immense amount of self-awareness regarding her personal and professional weaknesses and strengths.</p> <p>Dr. Royeen is highly understanding of other people’s differences because she puts great value on individuality.</p>	<p>Starting from a very young age, service has been the driving force to Dr. Royeen’s accomplishments.</p> <p>Dr. Royeen has had to make many sacrifices to accomplish the goals she has set for herself; however she made it clear that her work is her passion.</p>	<p>Dr. Royeen expressed the need to clearly define differences in scope of practice among OTA MOT and OTD.</p> <p>Dr. Royeen has experienced much adversity and has capitalized on her interpersonal skills to overcome it.</p>
<p align="center"><b>Assertion</b></p>	<p>As a forward thinker and strong self-advocate, Dr. Royeen is mindful in making decisions and is willing to embrace adversity to advance occupational therapy practice and education.</p> <ul style="list-style-type: none"> <li>- She is supportive of moving entry-level occupational therapy practice to the doctorate level.</li> </ul>		