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Predictors of General Well-Being in Postprofessional Students of Occupational Science and Occupational Therapy

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Predictors of General Well-Being in Postprofessional Students of Occupational Science and Occupational Therapy

Abstract

Background: Doctoral students experience decreased well-being during their educational experience. Self-compassion, engagement in meaningful occupations, and occupational balance positively impact well-being in individuals. This study examined the relationships between these constructs in postprofessional occupational science and occupational therapy students.

Method: This quantitative cross-sectional study collected national survey data (N = 113) using the Self-Compassion Scale – Short Form, the Engagement in Meaningful Activities Survey, the Occupational Balance Questionnaire 11, and the 14-item Scales of General Well-Being. Multiple linear regression analysis determined how well each construct predicted general well-being and the strength of each construct's relationship compared to other constructs.

Results: The model of combined variables was significant, $F(3, 104) = 36.22, p < .001$, accounting for 51.1% of the general well-being variance. All predictors were significant, with the self-compassion standardized coefficient beta being largest ($\beta = .39$), followed by engagement in meaningful occupations ($\beta = .38$), and occupational balance ($\beta = .16$).

Conclusion: Self-compassion, engagement in meaningful occupations, and occupational balance predicts well-being in postprofessional students, which is consistent with previously known relationships. The participants' understanding of foundational tenants of occupational science and occupational therapy may have helped mitigate further decline in their well-being, confirming the power of occupation to positively impact well-being.

Comments

The authors declare that they have no competing financial, professional, or personal interest that might have influenced the performance or presentation of the work described in this manuscript.

Keywords

post professional students, self-compassion, engagement in meaningful occupations, occupational balance, well-being

Credentials Display

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There is little room for argument that participating in graduate school education creates stress for students. While there might be some variation across students, overall, the literature suggests that postprofessional or research doctoral students experience a decline in their well-being during their educational experience (Byrom et al., 2022; Jackman et al., 2021; Schmidt & Hansson, 2018). However, extending self-compassion to oneself (Neff, 2003; Zessin et al., 2015), engaging in meaningful occupations (American Occupational Therapy Association [AOTA], 2020a, 2020b; Saraswati et al., 2019), and experiencing occupational balance (DaLomba et al., 2021; Yu et al., 2018) have been shown to impact well-being in individuals positively. This study examined whether self-reported ratings of these three constructs predict well-being in postprofessional occupational science and occupational therapy doctoral students enrolled in postprofessional occupational doctorate (PP-OTD) and doctor of philosophy (PhD) programs. PP-OTD students are advanced clinicians completing clinical, practice-oriented doctorates, and PhD students are pursuing research degrees. Throughout this article, doctoral-level students will refer to postprofessional students, not entry-level students.

Definitions of Well-Being

While there is not a universally accepted definition for well-being, several descriptions and definitions are found in the literature that illustrate the construct. According to the World Health Organization, well-being is “a general term encompassing the total universe of human life domains, including physical, mental, and social aspects, that make up what can be called a ‘good life’” (2006, p. 211). Well-being is multidimensional, combining the hedonic tradition, which focuses on pleasure, happiness, and life satisfaction, and the eudemonic tradition, which centers on positive psychological functioning and human development (Dodge et al., 2012). Well-being can also be described as the point of balance and equilibrium where an individual’s resources (e.g., psychological, social, physical) can meet the challenges a person faces (Dodge et al., 2012). From an occupational therapy perspective, well-being “includes satisfaction with participation in occupations and daily activities that enhance quality of life” (AOTA, 2020a, p. 1).

Postprofessional and Research Doctoral Student Well-Being

Graduate students, both master’s and doctoral level from various disciplines, experience decreased well-being during their educational experience (Council of Graduate Schools & The Jed Foundation, 2021). Unfortunately, evidence suggests that poor well-being is common among graduate students, and there is a rising trend with current graduate students struggling to maintain wellness more than in previous years (Council of Graduate Schools & The Jed Foundation, 2021). Graduate students experiencing stress is not a new phenomenon and is often expected as part of the educational process; however, increased stress levels can lead to severe psychological disorders and health-compromising behaviors that can negatively affect academic performance (Martinez et al., 2013). The problem of decreased well-being may be experienced by postprofessional occupational therapy and occupational science doctoral students, both those enrolled in PP-OTD and PhD programs. Doctoral students consistently experience high stress levels, challenges to their mental health, and concerning physical health issues (Sverdlik et al., 2018). Compared to the general population, doctoral students are six times more likely to experience anxiety and depression (Evans et al., 2018). While doctoral student experiences can differ by program and discipline, the literature has consistently demonstrated an inverse relationship between participation in a doctoral program and well-being (Jackman et al., 2021), as students are challenged to maintain a healthy work-life balance (Martinez et al., 2013; Schmidt & Hansson, 2018).

Reasons for doctoral students' decreased well-being can be attributed to university-related factors and factors associated with the doctoral student's personal life. Factors that are concerned with university processes include pressure to publish and present in a scholarly environment, high workload demands, academic identity, uncertainty, self-doubt, and advisor incompatibility and expectations (Jackman et al., 2021; Martinez et al., 2013; Schmidt & Hansson, 2018; Sverdlik et al., 2018). Financial constraints and competing roles and responsibilities (e.g., student, employee, researcher, parent) that require time, attention, and prioritization are some of the personal factors that contribute to decreased well-being in doctoral students (Martinez et al., 2013; Schmidt & Hansson, 2018; Sverdlik et al., 2018). Also, doctoral students report decreased opportunities to maintain social relationships and participate in social activities because of a lack of time and financial resources, which can negatively impact well-being (Sverdlik et al., 2018).

The impact of decreased well-being in postprofessional and research doctoral students can have both short-term and long-term ramifications, including decreased quality of life, increased attrition rates (Jackman et al., 2021; Martinez et al., 2013; Schmidt & Hansson, 2018; Sverdlik et al., 2018), and potential challenges related to future clinical and faculty roles (Schmidt & Hansson, 2018; Sverdlik et al., 2018). Doctoral students report having less life satisfaction as they attempt to fulfill student and family responsibilities, often having to choose one role over another (Jackman et al., 2021; Martinez et al., 2013; Sverdlik et al., 2018). Some doctoral students experience feelings of imbalance, burnout, depression, and decreased well-being as they neglect their physical health, partner relationships, leisure activities, and social interactions because of the high demands of their academic program (Sverdlik et al., 2018). Decreased well-being impacts an individual's personal life and influences a doctoral student's career trajectory and, more broadly, educational institutions. Decreased well-being can contribute to increased attrition rates, which can be as high as 50% among doctoral students (Martinez et al., 2013; Schmidt & Hansson, 2018; Sverdlik et al., 2018). Finally, while not all doctoral students will enter academia, for those who do, it is important to recognize that academic faculty have been identified in higher education institutions as having the most volatile workplace well-being (Schmidt & Hansson, 2018). Stressors in academic settings (e.g., competing responsibilities related to teaching, scholarship, and service; increasing teaching loads and class sizes; struggling students who require substantial attention; Barkhuizen et al., 2014; Shen & Slater, 2021) can negatively impact occupational performance, specifically job performance, and maintenance. Therefore, if doctoral students do not learn how to promote their well-being during their educational program, they run the risk of not achieving their career goals (Sverdlik et al., 2018) and experiencing continued well-being challenges as they transition into advanced clinical positions or academia, which has the potential to impact educational quality and system sustainability (Schmidt & Hansson, 2018).

Doctoral students use coping strategies to help mitigate some of the decreased well-being experienced during their academic programs. Identified coping strategies include self-care activities such as reflection, participation in physical activities (e.g., yoga, walking, biking), and compartmentalization (Jackman et al., 2021). Also, establishing a professional support network with fellow students and faculty has been identified in the literature as positively contributing to doctoral students' well-being (Jackman et al., 2021; Martinez et al., 2013; Schmidt & Hansson, 2018). Doctoral students could benefit from programming that focuses on prevention and early intervention (e.g., developing positive thinking patterns and resistance strategies, fostering meaningful peer communities, organizing recreational and fitness groups and seminars on time management) to lessen the negative effects associated with their educational

experience by equipping them with the tools needed to sustain them during their academic program (Schmidt & Hansson, 2018). This programming could be implemented at various levels (e.g., institutional, programmatic, personal; Jackman et al., 2021); however, before programming can be developed and implemented, further descriptions of doctoral student well-being are needed.

Occupational Therapy Student Well-Being

The available information about occupational therapy student stress and decreased well-being has been gathered from entry-level master's and doctoral occupational therapy students (Grab et al., 2021; Lewis-Kipkulei et al., 2021), not postprofessional students. Entry-level occupational therapy students experience significant stress during their academic programs, which negatively impacts their well-being (Grab et al., 2021; Lewis-Kipkulei et al., 2021). Common stressors contributing to occupational therapy students' stress include academics, finances, and relationships (Grab et al., 2021; Lewis-Kipkulei et al., 2021). Occupational therapy students have identified coping strategies, such as supportive friend and family relationships, participation in exercise (Grab et al., 2021), and leisure activities to help relieve their stress (Lewis-Kipkulei et al., 2021).

However, despite having learned about the importance of leisure and life balance in their occupational therapy coursework and recognizing that participation in these activities may help them cope, occupational therapy students have difficulty including these coping activities into their routines, leading to continued stress and decreased well-being (Grab et al., 2021; Lewis-Kipkulei et al., 2021). Students tend to prioritize academic work over participation in meaningful non-academic activities, resulting in occupational imbalance (Grab et al., 2021; Lewis-Kipkulei et al., 2021). If student stress and decreased well-being are left unaddressed, students will not only experience decreased well-being during their educational experience but could potentially develop professional burnout in the future (Lewis-Kipkulei et al., 2021). While entry-level student experiences may be similar to that of postprofessional occupational science and occupational therapy doctoral students, there is a shortage of literature that specifically describes well-being in postprofessional occupational science and occupational therapy doctoral students.

Positive Impacts on Well-Being

Being self-compassionate (Neff, 2003; Zessin et al., 2015), engaging in meaningful occupations (AOTA, 2020a, 2020b; Saraswati et al., 2019), and experiencing occupational balance (DaLomba et al., 2021; Yu et al., 2018) have been shown to impact a person's well-being positively. A person is self-compassionate when they extend understanding toward oneself through kindness, a sense of common humanity, and mindfulness, even when the person feels undeserving (Neff, 2003). When people give themselves self-compassion, they can experience emotional safety, change their thoughts and behavior patterns, and develop a motivating force to experience growth (Neff, 2003). The occupational therapy domain and process occurs in its fullest sense when a person achieves health, well-being, and life participation through engagement in occupation (AOTA, 2020b). Occupational engagement includes the objective aspect of doing occupations and the subjective aspect of meeting various occupational needs, such as competence, companionship, contentment, pleasure, and renewal (Doble & Caron Santha, 2008; Saraswati et al., 2019). Conversely, when a person does not regularly engage in meaningful occupations, their occupational needs are unmet, and their well-being is negatively affected (AOTA, 2020b). A person experiences occupational balance when they are participating in the right amount of life activities and the right variation of occupations, leading to improved well-being (Matuska & Barrett, 2019; Wagman et al., 2012). A person may experience occupational imbalance when stressed or experiencing changes in their

typical routine because they do not have enough time, variety, or resources to meet their occupational requirements and desires (Matuska & Barrett, 2019).

Students may feel a disparity in their occupational balance when they do not feel they are engaged in the right amount and types of occupations (Wagman et al., 2012). Students may feel like they are only doing schoolwork or participating in activities that are physically draining or are done for others. Students may also have minimal time for leisure, for themselves, or for social relationships, which are known coping strategies contributing to their decreased well-being. Despite being important tenets of the occupational science and therapy professions and learning about the importance of engagement in meaningful occupations and occupational balance in their curriculum, both occupational therapy students and faculty acknowledge that students have decreased occupational engagement and experience very little occupational balance during their educational experience (Grab et al., 2021).

Purpose of the Current Study

While there is literature that describes student well-being, the focus has primarily been on the undergraduate student population, leaving doctoral students' experiences, particularly those in postprofessional programs, largely overlooked and in need of further exploration (Schmidt & Hansson, 2018; Sverdlik et al., 2018). The information that is available regarding postprofessional and research doctoral students has primarily centered around the structural aspects of the doctoral experience as opposed to their personal lives and overall well-being or has used a qualitative methodology (Sverdlik et al., 2018). Therefore, an understanding of how doctoral students' well-being is impacted during their educational experience from a quantitative perspective is needed (Jackman et al., 2021; Sverdlik et al., 2018). Also, much of the literature describing the well-being of occupational therapy students has been gathered from entry-level students as opposed to postprofessional occupational science and occupational therapy doctoral students (Grab et al., 2021; Lewis-Kipkulei et al., 2021). Knowing that postprofessional occupational therapy and occupational science doctoral students may have different life circumstances (e.g., family or caregiver obligations, work experience/responsibilities, age) and academic requirements (e.g., hybrid or online program delivery, dissertation/capstone project/professional portfolio, faculty mentorship vs. cohort model) from entry-level occupational therapy students, it is important to explore this population apart from what is known about entry-level occupational therapy students.

This study examined the relationships between self-compassion, engagement in meaningful occupations, and occupational balance to general well-being in postprofessional occupational science and occupational therapy doctoral students. Specifically, the research question addressed in this study was: Do self-compassion, engagement in meaningful occupations, and occupational balance significantly predict general well-being in postprofessional occupational science and occupational therapy doctoral students? The hypothesis was: Students who report high levels of self-compassion, occupational balance, and engagement in meaningful activities will also report high levels of general well-being. Therefore, a positive correlation was expected between self-compassion, engagement in meaningful occupations, occupational balance, and general well-being, suggesting that self-compassion, engagement in meaningful occupations, and occupational balance can predict general well-being.

Method

Research Design

A cross-sectional survey design was used for this study which was approved by the Texas Woman's University Institutional Review Board. After completing the two screening questions at the

beginning of the survey, the participants provided informed consent by choosing the option of agreeing to participate in the survey before accessing the demographics questionnaire and standardized assessments.

Recruitment

Postprofessional occupational science and occupational therapy doctoral students were recruited to participate in the study through multiple methods. The primary investigator emailed the letter of invitation to the program contacts listed on AOTA's Postprofessional Programs in OT – Doctoral Level Programs website, requesting that they forward the invitation to their current students. A follow-up email was sent to the same program contacts 1 week after the initial email as a reminder to ensure all students interested in participating had the opportunity. While the total population number from which the sample was recruited cannot be calculated because postprofessional programs are not accredited, and the number of students admitted per cohort is not consistent, emails were sent to 55 program contacts. Potential participants were also recruited via social media (e.g., AOTA's CommunOT survey, OT program FaceBook pages) and through a snowball sampling recruitment strategy, with anyone who received the letter of invitation being asked to share it with other postprofessional occupational science and occupational therapy doctoral students.

Instrumentation

Data were collected using an online survey composed of four separate self-report questionnaires. The participants first responded to demographics questions, which included age, gender, ethnicity, program enrollment, year in program, relationship status, caregiving responsibilities, and status as a first-generation student. Following the demographics questionnaire, the participants completed four scales to assess self-compassion, engagement in meaningful activities, occupational balance, and general well-being. The standardized measurements were chosen because they are regularly used in the literature to measure these constructs, demonstrate strong psychometric properties, and have been widely used with student populations (Eakman, 2011; Hayes et al., 2016; Kotera & Sheffield, 2020; Mahmud et al., 2021; Pekçetin & Günel, 2021; Raes et al., 2011; Singh & Bandyopadhyay, 2021; Tan et al., 2021).

The Self-Compassion Scale – Short Form (SCS-SF) was used to determine the participant's level of self-compassion (Raes et al., 2011). The SCS-SF is a 12-item scale that was developed as a shorter alternative to the Self-Compassion Scale, which contains 26 items (Raes et al., 2011). The SCS-SF has demonstrated adequate internal consistency ($\alpha = 0.86$), an almost perfect correlation to the original Self-Compassion Scale ($r = 0.97$), and a confirmation factor analysis demonstrated both the same six-factor structure and single higher-order self-compassion factor as the longer scale (Raes et al., 2011). The participants indicated how they typically act toward themselves during difficult times (e.g., "When something painful happens, I try to take a balanced view of the situation" or "When I'm going through a very hard time, I give myself the caring and tenderness I need") using a 5-point Likert scale ranging from 1 (*almost never*) to 5 (*almost always*). After performing reverse scoring, the participant's individual item ratings were added to achieve their total score, with 12 indicating very low self-compassion to 60 (highest level of self-compassion). Internal consistency reliability for the current sample was $\alpha = .837$.

The Engagement in Meaningful Activities Survey (EMAS) was used to measure the subjective qualities of meaningful activity participation (Eakman, 2012). The EMAS, a 12-item assessment, was originally developed to describe the construct of meaningful activity participation using a 5-point scale ranging from 1 (*never*) to 5 (*always*) (Goldberg et al., 2002). The EMAS was later modified to include the adjectival descriptors of *rarely* (2), *sometimes* (3), and *usually* (4), and ultimately reduced the response options to four categories with *never* being removed (Eakman, 2012). The modified EMAS demonstrates

adequate test-retest reliability ($r = 0.71$), internal consistency reliability ($\alpha = 0.88$), and significant convergent reliability with other assessments that measure meaning and purpose in life, quality of life, and life satisfaction (Eakman, 2011; Eakman et al., 2010). The participants were asked to rate each of the 12 items (e.g., “The activities I do give me a sense of satisfaction” and “The activities I do have just the right amount of challenge”) using the 4-point scale. The item ratings were totaled, ranging from 12 to 48. Internal consistency reliability for the current sample was $\alpha = .881$.

Occupational balance was measured using the 11-item Occupational Balance Questionnaire 11 (OBQ11; Håkansson et al., 2019), which is a revised version of the Occupational Balance Questionnaire (OBQ), which has 13 items (Wagman & Håkansson, 2014). The OBQ showed good internal consistency ($\alpha \geq 0.94$) and sufficient test-retest reliability ($r_s = 0.93$; Wagman & Håkansson, 2014); however, further OBQ validity testing using Rasch analyses found that the original response scale (six categories) did not work as intended and that two items were multidimensional (Håkansson et al., 2019). Therefore, in the OBQ11, four response categories are used, and the two items have been removed (Håkansson et al., 2019). For the OBQ11, items (e.g., “There is a balance between things I do for myself and things I do for others” and “I am satisfied with the amount of time that I spend relaxing, recovering, and sleeping”) are scored on a 4-point scale ranging from 0 (*strongly disagree*) to 3 (*strongly agree*). Individual items are summed to obtain a total score (0 to 33), with higher scores indicating higher occupational balance. Internal consistency reliability for the current sample was $\alpha = .908$.

Finally, the 14-item Scales of General Well-Being (14-SGWB), which was developed from the original Scales of General Well-Being, a 65-item assessment, was used to measure general well-being (Longo et al., 2018). McDonald's omega hierarchical (ω_h) coefficient (0.86) demonstrated a high level of interrelationship between the 14 items (e.g., “I am highly effective at what I do” and “I feel great about myself”) (Longo et al., 2018). The participants reported their general well-being using a 5-point scale ranging from 1 (*not at all true*) to 5 (*very true*). A higher score indicates higher well-being. Internal consistency reliability for the current sample was $\alpha = .91$.

Data Collection

The demographics questions and all the instrument items were entered as one survey in Qualtrics, an online survey platform (Qualtrics, 2020). The participants accessed the survey via a link provided in the letter of invitation email.

Analysis Plan

Data were analyzed using SPSS Statistics (IBM, 2020). Descriptive statistics were calculated to characterize the study participants. A multiple regression analysis was conducted to examine how well each construct (self-compassion, engagement in meaningful occupations, occupational balance) predicted general well-being, including determining the strength of each construct's relationships to well-being compared to the other constructs.

Results

Sample

The sample included 113 participants who all identified as current students in a postprofessional (PP-OTD or PhD) occupational science or occupational therapy program and occupational therapists. The mean participant age was 38.63 ($SD = 9.73$). The sample was 5.3% male, similar to the profession percentage, with males representing 9.1% of occupational therapists overall (AOTA, 2020c). Refer to Table 1 for additional demographic information.

Table 1
Demographic Characteristics of Participants

Baseline Characteristic		N	%
Gender	Female	107	94.7
	Male	6	5.3
Ethnicity	White	90	79.6
	Hispanic or Latino	2	1.8
	Black or African American	8	7.1
	Asian or Pacific Islander	9	8.0
	Prefer not to answer	3	2.7
	Other	1	.9
Postprofessional program	PhD	28	24.8
	Postprofessional OTD	85	75.2
Year in program	1 st year	40	35.4
	2 nd year	42	37.2
	3 rd year	20	17.7
	4 th year	3	2.7
	5 th year	2	1.8
	6 th year	4	3.5
Relationship Status	Other	2	1.8
	Single, never married	21	18.6
	Married or domestic partnership	83	73.5
	Divorced	6	5.3
	Separated	2	1.8
Caregiving responsibilities	Prefer not to answer	1	.9
	Yes	66	58.4
First generation student	No	47	41.6
	Yes	26	23.0
	No	87	77.0

To determine relationships, initially, correlation analysis was used to examine bivariate relationships among variables of interest. The results indicated that all relationships were positive and statistically significant (see Table 2). There were moderate correlations between general well-being and self-compassion ($r = .56, p < .01$), occupational balance ($r = .45, p < .01$), and engagement in meaningful occupations ($r = .56, p < .01$). Weaker correlations existed between occupational balance and self-compassion ($r = .36, p < .01$), between engagement in meaningful occupations and self-compassion ($r = .30, p < .01$), and between occupational balance and engagement in meaningful occupations ($r = .39, p < .01$).

Table 2
Means, Standard Deviations, and Bivariate Correlations of all Variables

	M	SD	1.	2.	3.	4.
1. SCS-SF	3.17	.63	-			
2. OBQ11	2.32	.54	.36**	-		
3. EMAS	2.85	.40	.30**	.39**	-	
4. 14-SGWB	3.83	.55	.56**	.45**	.56**	-

Note. SCS-SF = Self-compassion Scale – Short Form; OBQ11 = Occupational Balance Questionnaire 11; EMAS = Engagement in Meaningful Activities Survey; 14-SGWB = 14-item Scales of General Well-Being. ** $p < .01$.

A multiple linear regression was conducted to examine how well self-compassion, engagement in meaningful occupations, and occupational balance predicted general well-being. More specifically, the multiple linear regression model examined how self-compassion, engagement in meaningful occupations, and occupational balance (independent variables) explained the variation in general well-being (dependent variable). The results indicated that the overall model was statistically significant, $F(3, 104) = 36.22, p <$

.001, and accounted for 51.1% of the variance in general well-being. All predictors were statistically significant (see Table 3), and regression coefficients were all positive. Therefore, higher ratings for self-compassion were associated with higher general well-being, $\beta = .39$, $p < .001$; higher ratings of engagement in meaningful occupations were associated with higher general well-being, $\beta = .38$, $p < .001$; and higher ratings for occupational balance were associated with higher general well-being, $\beta = .16$, $p = .036$.

Table 3

Summary of Multiple Regression Analysis Predicting General Well-Being Scores

Predictor	Unstandardized		Standardized		<i>p</i>	95% CI
	<i>B</i>	<i>SE</i>	β	<i>t</i>		
SCS-SF	0.34	0.07	0.39	5.32	< .001	[.212, .470]
EMAS	0.53	0.10	0.38	5.07	< .001	[.320, .732]
OBQ11	0.17	0.08	0.16	2.12	0.04	[.011, .321]

Note. SCS-SF = Self-compassion Scale – Short Form; OBQ11 = Occupational Balance Questionnaire 11; EMAS = Engagement in Meaningful Activities Survey; 14-SGWB = 14-item Scales of General Well-Being. $F(3, 103) = 34.15$, $p < .001$, $R^2 = .51$, adjusted $R^2 = .48$.

While all predictors were significant, the self-compassion standardized coefficient beta was largest ($\beta = .39$), followed by engagement in meaningful occupations ($\beta = .38$), and then occupational balance ($\beta = .16$). These results suggested that self-compassion and engagement were the strongest predictors of general well-being. Occupational balance was also a statistically significant predictor of well-being; however, it was not as important to the model in comparison to self-compassion and engagement in meaningful occupations.

Discussion

The purpose of this study was to examine the relationships between self-compassion, engagement in meaningful occupations, and occupational balance to general well-being in postprofessional occupational science and occupational therapy doctoral students. The purpose, research question, and hypothesis were all supported by the outcome that self-compassion, engagement in meaningful occupation, and occupational balance can predict overall general well-being. These findings are consistent with the literature that states extending compassion to oneself (Neff, 2003; Zessin et al., 2015), engaging in meaningful occupations (AOTA, 2020a, 2020b; Saraswati et al., 2019), and experiencing occupational balance (DaLomba et al., 2021; Yu et al., 2018) can promote well-being. These findings also indicate that previously known relationships between self-compassion, engagement in meaningful occupations, occupational balance, and well-being occur in postprofessional occupational therapy and occupational science students. While all constructs were significant in predicting well-being, self-compassion was determined to be the best predictor of general well-being, with engagement in meaningful occupations being the next best predictor, followed by occupational balance.

The self-compassion means were the highest across all assessments and were determined to be the strongest predictor of general well-being. Therefore, the results seem to suggest that self-compassion is an initial and essential component of promoting student well-being. Doctoral students are faced with pressure to produce scholarship (Schmidt & Hansson, 2018) and quality projects, meet faculty advisor expectations (Jackman et al., 2021; Martinez et al., 2013; Sverdlik et al., 2018), and juggle various roles and responsibilities (Martinez et al., 2013; Sverdlik et al., 2018), which can impact their ability to engage in meaningful occupations and experience occupational balance. If students recognize that suffering and

failure are part of the common human experience and that they do not have to be perfect in all that they do, then maybe they can extend kindness and care to themselves (Neff, 2003). When students are more self-compassionate, they may be more likely to engage in various meaningful occupations, leading to occupational balance and improved well-being.

Even though postprofessional students experience similar challenges to their general well-being as other graduate students, their training as occupational therapists and scientists might have provided them with the knowledge and appreciation for the importance of engaging in occupation (AOTA, 2020a, 2020b; Saraswati et al., 2019) and pursuing occupational balance (DaLomba et al., 2021; Yu et al., 2018) in promoting their well-being. Despite experiencing feelings of imbalance, burnout, depression, and decreased well-being during their academic program, the students' belief in these foundational tenets of occupational science, occupational therapy, and participation in meaningful occupations may serve as a protective layer from further decline in well-being.

Limitations and Future Research

This study had several limitations. First, there were few males who participated in this study; therefore, the results may not reflect all student perspectives and impact generalizability. Also, this was a cross-sectional survey study with data being collected at one time point. There is a possibility that the participant responses may have differed at another time during the semester. Also, the participants were enrolled in two different programs (PP-OTD and PhD), both of which are considered to be postprofessional; however, the data was analyzed collectively. A separate data analysis by program may have yielded different results.

This study provides suggestions for future research. Comparisons of various groups (e.g., gender identity, year in program, program type, ethnicity, caregiver role, and relationship status) could be completed to see if there are significant differences in how postprofessional occupational science and occupational therapy doctoral students describe their states of self-compassion, occupational engagement, and well-being. Overall, there is limited literature available specific to postprofessional students. Therefore, a qualitative descriptive research study could be conducted to further explore postprofessional occupational science and occupational therapy doctoral students' well-being, with data being collected via interviews or written reflections. Knowing there is a difference in rigor and commitment between PP-OTD and PhD programs, which could impact overall student stress and well-being, a future study separating the postprofessional population by specific program could be warranted. Also, future research from the occupational therapy and occupational science educator perspective would clarify how faculty members view student well-being and can support and prevent loss of well-being, specifically in postprofessional students. Finally, recognizing there was limited gender and ethnic diversity represented in the sample population, future studies dedicated to exploring the well-being of gender and ethnically diverse students enrolled in occupational science and occupational therapy programs could be an additional area for research.

Conclusion

Postprofessional occupational science and occupational therapy doctoral students experience decreased well-being during their educational experience. However, being compassionate to oneself, engaging in meaningful occupations, and maintaining occupational balance can help predict a person's well-being. The results from this study suggest that these three predictors of well-being also apply to postprofessional students, thereby confirming the power of occupation to impact well-being positively in a new population.

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