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Swedish occupational therapists' considerations for leaving their profession: outcomes from a national survey

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ABSTRACT

Background: Occupational therapists are an essential healthcare profession and play a vital role in rehabilitating patients in the activities of daily life. Nevertheless, many occupational therapists in Sweden are leaving the profession and this jeopardises occupational therapy services.

Objective: To explore factors that cause occupational therapists to seriously consider leaving their profession.

Material and methods: As part of a larger national study of Swedish occupational therapists' health and work environment, qualitative content analysis with a summative approach was applied to explore the reasons for considering leaving their profession among 1279 Swedish occupational therapists.

Results: Three themes emerged: (1) facing work environment deficiencies, (2) pursuing own development and (3) Personal factors and external constraints. The largest category, belonging to theme 1, was stress and high work pressure given 344 times as a reason to consider leaving the profession.

Conclusions and significance: This article provides new and important insights on the reasons why occupational therapists may seriously consider leaving their profession. The results are significant for managers and employing organizations to consider in order to prevent a shortage of occupational therapy services.

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environment

Introduction

In Sweden [1], approximately 1.2 million people, representing one-quarter of the national workforce are employed in the welfare sector. The need for care and rehabilitation is predicted to increase over the next decade due to the increasing number of children and elderly, while the number of people of working age is expected to increase more slowly. The demand for care and rehabilitation efforts due to the COVID-19 pandemic has also increased in the past year [2,3]. In the healthcare sector, the demand for professionals is one of the main challenges to meeting these increasing needs [4,5]. Governments in many western countries face a shortage of skilled healthcare staff [5,6]. Therefore, the ability of the sector to retain its existing workforce is particularly important [2]. Additionally, the employee turnover is both costly for the organization, and affects patients through reductions in the quality and continuity of healthcare and rehabilitation services [7]. Exploring why healthcare

professionals intend to leave their profession is therefore important.

The work environment (physical, social and organizational) is very important in the prevention of healthcare professional turnover [8–10]. The work environment includes organisational, social and physical factors that impact a person's work performance and health [11]. The organizational work environment includes governance and management, latitude to act, job requirements and resources. The social work environment includes social interaction and collaboration with colleagues and others, as well as social support from managers and colleagues [12]. According to the Model of Human Occupation [13] resources in the work environment such as guidance and support are beneficial to employees, facilitate work performance and sustain and increase motivation and participation. Whereas, low expectations from managers and co-workers may negatively affect individuals'

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motivation and work performance and intention to stay at the job.

The reasons for job turnover in the working population have been extensively researched and depends on job-related stress, lack of commitment inside the organization and job dissatisfaction due to unclear expectations and lack of consensus in combination with job-related stress, for example [14]. Organizational instability has also been found to lead to staff turnover [15]. As described above, it is important for the healthcare to retain its existing workforce in order to continue providing high quality healthcare and rehabilitation services [7]. Factors that affect healthcare professional job satisfaction and intention to leave in general include support from manager, autonomy, career advancement opportunities, recognition for doing the job well and feelings of worthwhile accomplishment [15]. To develop strategies to prevent intention to leave among healthcare professionals, there is a need to further understand why specific groups of healthcare professionals intend to leave their profession.

The reasons for intention to leave has primarily been studied among nurses [16–18] and found to be heavy workload and stress, and lack of career development opportunities including professional development, social factors and insufficient salary [16,17]. Work life balance is a mediating factor [18]. Additionally, organizational support mitigates intentions to leave the profession among nurses. Research done in other groups of healthcare professionals is scarcer. In a recent national study [19] among 3658 registered occupational therapists in Sweden, 58% reported that during the previous year they had seriously considered seeking new employment, and 35% had seriously intended to leave their profession. Sixty-seven percent rated their workload as too high, leading to increased stress, difficulties doing a good job and increased job turnover among colleagues. In a study by Scanlan et al. [20] among 103 occupational therapists working in mental health, wellbeing at work was found significantly associated with turnover intention and was mediated by job satisfaction. Work life balance and perceived rewards such as prestige and recognition are significantly associated with well-being at work. In a study among 34 occupational therapists in mental healthcare [9], burnout was associated with decreased job satisfaction and increased job turnover rates. Recipient contact with demanding patients, stress and fatigue were most frequently associated with burnout and job turnover. No studies have been performed on the reasons why occupational therapists

intend to leave their profession and find work outside of occupational therapy.

In summary, the healthcare sector in Sweden is at risk of losing experienced occupational therapists. Occupational therapy is an essential profession in the rehabilitation of individuals in activities of daily life [21,22] and the demand for occupational therapy services is increasing [2,3,5]. Yet in Sweden, more occupational therapists are leaving the profession, jeopardising the delivery of occupational therapy services [19]. Up to the present, few studies have been performed that explore the reasons driving occupational therapists to leave their profession. Consequently, understanding is lacking and more research in the field is required. As such, the aim of this study was to explore factors that cause Swedish occupational therapists to seriously consider leaving their profession.

Materials and methods

This article describes a qualitative study [21]. An online survey was sent to all currently practicing members of the Swedish occupational therapist association in February 2018 as part of a larger study of Swedish occupational therapists' mental health, work environment and occupational balance [19]. The results are based on the occupational therapists who participated and answered the specific questions related to the present study aim.

Participants and eligibility

Eligible participants were registered occupational therapists who were members of the occupational therapist association in Sweden at the time of the survey (2018). Exclusion criteria were: (1) being on parental leave, (2) being on sick leave, (3) having retired and (4) having replied 'no' to the survey question if he/she had considered leaving the occupational therapy profession during the last year. The occupational therapist association in Sweden is a trade union and a professional organisation with responsibility for promoting the occupational therapy profession in Sweden. Approximately 75% of all Swedish occupational therapists are members. The survey was sent to all occupational therapists who met the criteria ($N=7600$); 3658 gave informed consent to participate and answered the online survey, a response rate of 48%. Out of these, 1279 (35%) replied 'yes' to having considered changing career completely and were included in this study (Figure 1).

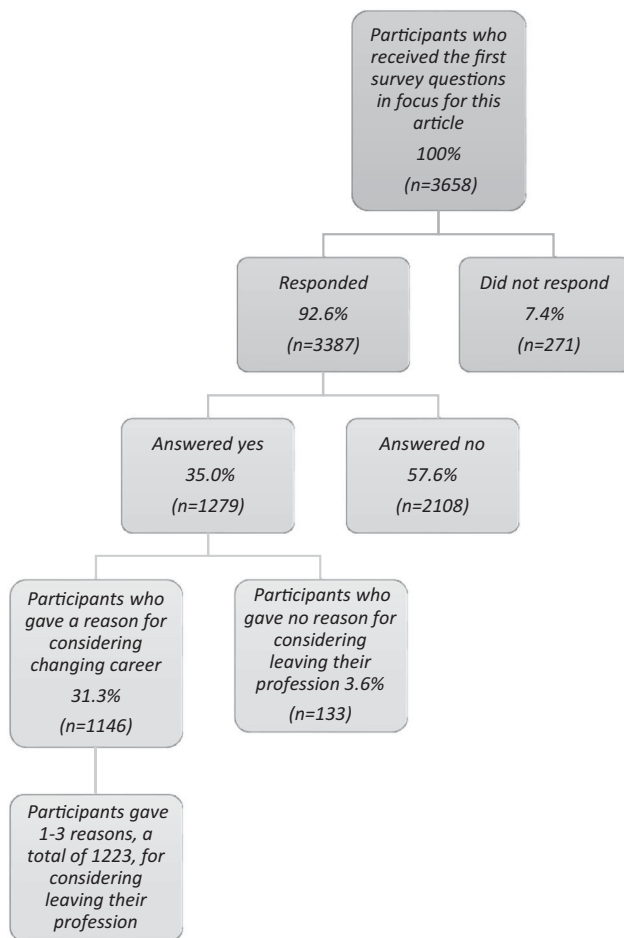


Figure 1. The analysis process for the survey questions.

Table 1. Description of sociodemographic factors for Swedish occupational therapists who considered leaving the profession ($n = 1279$).

Characteristics	N	%
Sex ($n = 1273$)		
Female	1192	94
Male	76	6
Other	5	0
Age in years (mean, range) ($n = 1265$)	44 (22–66)	
Occupational education degree ($n = 1271$)		
Professional/bachelor	1178	93
Master	76	6
Doctoral	17	1
Work experience (number of years, range) ($n = 1262$)	17 (1–50)	
Sector ($n = 1269$)		
Municipality and region (healthcare services)	1093	86
Private	109	9
State (e.g. university, public employment service)	67	5

The majority of the participating occupational therapists were female (94%) and worked in the Swedish municipality and region in the healthcare service (86%) with average 17 years of work experience. See Table 1 for further information on sociodemographic factors.

Data collection

The online survey was distributed *via* Research Electronic Data capture (REDCap). REDCap is a secure web application for creating and distributing online research surveys [22]. The survey was accessible for 3 weeks and a reminder was sent on two occasions. An informational letter describing the study aims, procedures and ethical considerations was sent with the link to the survey. The participants were asked for informed consent as the first question in the survey. All data collection procedures were in keeping with the ethical standards of the responsible committees on human experimentation (institutional and national) and the Helsinki Declaration of 1975, as revised in 2000. The Regional Ethical Board in Sweden approved the study (Dnr. 2017/975).

The survey questions for this study were:

1. During this past year, have you seriously considered leaving your profession and doing something outside of your occupational therapy profession? (Yes/No)
2. If yes, what is the main reason?

The survey also included questions on sociodemographic characteristics (e.g. sex, age in years, educational level, work experience as occupational therapist in years and work field).

Data analysis

Of those who answered yes ($n = 1279$) on the survey question if they had seriously considered leaving the profession during this past year, 1146 participants gave one or more explanations to support their response. One hundred and thirty-three ($n = 133$) participants did not provide any explanation. This resulted in 1223 explanatory statements that are the focus of this data analysis. See Figure 1 for more information.

Data were analysed using qualitative content analysis with a summative approach [21]. A summative approach starts with identifying and counting words or content in the text with the purpose of understanding the contextual use. This means exploring the use of the word or content and in the frequency with which the word is mentioned. The quantifications are an effort to explore the usage of the words and can include a single word or a sentence. The quantifications were not intended to provide meaning. The authors always review and value the context in which the words are used. This is the manifest part of the

content analysis and allows the researcher to stay close to the answers to the research questions. The following latent part of the analysis involves the process of interpreting the words or the content and exploring the deeper meaning of these to develop categories and themes. As a first step, the participants' answers were read several times and thereafter coded and tabulated. The codes were subsequently read several times by the authors and compared; similar codes formed broader categories. In the final step, the categories generated themes describing the underlying meaning. In a last step, the words or the content were sorted under each category and theme, and the final counting was done.

Results

The analysis resulted in three themes: (1) *Facing work environment deficiencies*, (2) *Pursuing own development* and (3) *Personal factors and external constraints*. The themes and their categories are shown in Table 2.

Theme 1: Facing work environment deficiencies

Facing work environment deficiencies proved to be the largest theme and corresponded to 712 statements. Stress and high work pressure, an insufficient salary, insufficient leadership and a dysfunctional organization, along with a lack of appreciation and value for one's knowledge were stated as important reasons for seriously considering leaving the profession.

Stress and high work pressure

Stress and high work pressure resulting from a heavy workload were mentioned extensively as negatively affecting the occupational therapists' working life and the feeling of not being able to execute a quality job. The feeling of not being able to give their patients

valued services left the occupational therapists with a feeling of inadequacy and dissatisfaction. Stress and high work pressure were also described as resulting in mental health problems such as stress symptoms, and negatively affected the occupational therapist's private life. One participant expressed how the negative effects of work-related stress affected her spare time:

I don't feel satisfied with the job I do, and I sleep badly at night, having trouble disconnecting from work. I feel stressed out in my spare time.

Some participants stated that they enjoyed practicing their profession, but stress and a heavy workload had made them reconsider if the job was worthwhile. Some participants stated a feeling of hopelessness that this adverse, stressful workload would ever change. The feeling of never catching up was mentioned. One participant expressed:

The job can eat one up if one doesn't not watch out. Mentally heavy workload with a difficult target group takes energy. Stress is a consequence, with risk of poor health in the long term.

A shortage of personnel due to colleagues leaving or recruitment difficulties were also mentioned as adding to the high work pressure.

Insufficient salary

The participants stated poor salary as being a significant negative factor that negatively affected their willingness to remain in the profession. Most of the participants gave a short statement and explanation such as: *low salary*, *bad salary*, *bad salary increases* or the *salary being a catastrophe*. The participants also expressed limited prospects for increasing their salary through continuing in the profession. Participants conveyed that even though they had a heavy workload and substantial responsibility, they still had a low salary. The salary did not reflect the substantial

Table 2. Summary of the themes, categories and the number of stated reasons why occupational therapists seriously considered leaving their profession and doing something completely outside their profession^a.

	<i>n</i> (%)		<i>n</i> (%)		<i>n</i> (%)
Themes					
1. Facing work environment deficiencies	712 (58.2)	2. Pursuing own development	478 (39.1)	3. Personal factors and external constraints	33 (2.7)
Categories					
Stress and high work pressure	344 (48.3)	Desire to develop one's skills	312 (65.3)	Circumstances outside one's control <i>n</i> = 25	25 (75.8)
Insufficient salary	194 (27.2)	Need for a change	166 (34.7)	Commuting and work hours	8 (24.2)
Insufficient leadership and dysfunctional organization	121 (17.0)				
Lack of appreciation and value of one's knowledge	53 (7.4)				

^aA total of (1223) stated reasons from 1146 participants e.g. one participant could state multiple statements.

responsibility their work had on their client's health and future recovery. The low salary was expressed as a reason to change professions even though they valued the job itself. One participant expressed:

It's sad that you have to change jobs to get a higher salary if you are happy in your job.

Some participants perceived that other professionals in the healthcare sector received a higher salary despite the fact that the work tasks they performed required less competence and responsibility. In their view, salary was not always linked to responsibility and competence. They therefore felt they were not fairly treated. Furthermore, the participating occupational therapists felt that insufficient salary signalled a lack of respect for their profession, as the salary was considered an appreciation for a job well done, with a low salary indicating the opposite. One participant expressed:

I'm tired of all the talk that there is no money for occupational therapists but there is money for other occupational groups. There is a lack of respect for our profession.

Insufficient leadership and dysfunctional organization

A large number of participants had experienced negative leadership approaches in their workplace. Participants expressed *insufficient leadership* and *lack of existing leadership*. The lack of opportunities to participate in decisions that concerned one's work caused frustration and a lack of trust in managers. Furthermore, *deficiency of support from managers* was raised. Managers were described as lacking presence, leaving occupational therapists with limited support. One participant recounted the feeling of not being seen and listened to by the manager:

I feel unsuccessful when I don't feel listened to. [I] feel useless in situations like that.

A significant number of occupational therapists noted organizational problems as a reason to consider leaving their profession. Those who identified organizational issues mainly did so in negative terms. Examples given were: *poor organization*, *dissatisfaction with the organization*, *lack of support from the organization* and *disorganized organization*. Reorganizations and a lack of clear organizational structure were additionally mentioned as additional reasons to considering changing careers. One participant stated:

An organization that does not listen. High demands that you should solve impossible problems.

Some mentioned a desire to leave healthcare completely. One participant mentioned:

I want to avoid the healthcare sector as it has become a problem area with all deficiencies.

Lack of appreciation and value of one's knowledge

A substantial number of the participating occupational therapists stated that there was a lack of respect, appreciation and value for their knowledge and skills among managers and colleagues, and they therefore had to struggle for recognition. For example, this was expressed as *not getting recognised*, *not being viewed as important* or *not being appreciated*. Participants described the need to frequently explain what occupational therapists do, feeling that the profession was neither visible nor viewed as of significant importance. One participant stated:

I don't feel that occupational therapists are seen and heard. We have to work in headwinds almost constantly.

A few participants asserted a perception that occupational therapists were not as highly appreciated as physiotherapists. The participants also described a struggle to find their own professional identity and a repeated requirement to prove their competence to others. Some mentioned that occupational therapists were used for fixing technical equipment, leading to limited time with their patients. There was an overall feeling of frustration and lack of appreciation leading to uncertainty in the working role. One participant stated:

It is tough to constantly have to prove oneself and one's profession.

Some mentioned that this lack of understanding of the occupational therapy profession could be due to a lack of media attention and a distinct professional role.

Theme 2: Pursuing own development

Pursuing own development was the second largest theme and corresponded to 478 statements. Two categories could be seen with a characteristic difference as to why the participants felt the need for pursuing their own development and therefore had seriously considered leaving the profession. The first category was a desire to develop one's skills and the second was expressed in

more negative terms as a need for a change. These were mainly due to lack of career advancement opportunities including opportunities for professional development, and being tired of the profession.

Desire to develop one's skills

The majority of the participants had a desire to develop their occupational therapy skills. The participants gave several explanations, e.g. *wanting to develop their skills, to improve their skills* or *to try something new*. Some wanted to develop their occupational therapy skills and experiences by trying *a new professional area*. Some referred to being *curious of working in another field*. One participant explained:

I like change. I would like to have a more senior role in the work environment field where I can have a higher impact.

Additionally, some participants mentioned the desire to start their own business or to incorporate their personal interests into a new professional role such as working with animals or in politics. Indeed, several of the participants had already moved onto a leadership or a management role.

Need for a change

A significant number of the participants stated their reason for considering leaving the profession was a need for change due to negative work experiences. This included lack of career advancement opportunities including professional development in their role as occupational therapist. This was expressed as a *lack of opportunities to have a more senior career* or *lack of possibilities to develop one's professional skills*. The feeling of being *tired of the profession, tired of working in healthcare* and that *the job is not fun anymore* were also stated as reasons for the need to pursue their own development. Some mentioned regretting becoming an occupational therapist and questioned if occupational therapy was the right choice for them. Many of the participants stated that they felt tired of working with individuals who needed their services. Some participants said that they did not want to continue to work with ill individuals anymore. One participant mentioned:

I have worked in the profession for a long time and feel a longing to do other things that have nothing to do with sick people.

Theme 3: Personal factors and external constraints

The final theme, personal factors and external constraints, was the smallest theme and corresponded to 33 statements. Here the participants provided explanations for considering leaving the profession due to circumstances over which they had no or limited control. Examples included injuries or illnesses that affected their ability to perform their work duty. Additionally, commuting to work was mentioned, as was moving to a different location.

Circumstances outside one's control

Some participants stated that their employment was limited in time since they worked in a temporary project and that the insecure work situation had made them consider leaving the profession. A few mentioned they experienced illness or functional limitations that affected them and their consideration to leave the profession.

I have developed fibromyalgia and as a result I have also developed an exhaustion disorder. Based on this I feel that I may need to work with something different.

Commuting and work hours

A limited number of the participants expressed that they considered changing careers due to difficulties in commuting to work. Some mentioned that they wanted less commuting time to have more time with their family. One participant stated:

I have a tiring commuting distance to my work.

Discussion

This study is derived from a national survey of Swedish occupational therapists. It highlights the reasons why occupational therapists may consider leaving their profession. These concerns need to be addressed, not only to reduce the number of occupational therapists leaving the profession, but also to prevent those who remain from developing mental health problems. The largest theme identified was *Facing work environment deficiencies*. This theme was driven by stress and high work pressure that negatively affected the occupational therapists work

environment. The category *Stress and high work pressure* was the most frequently stated reason for considering leaving the profession. The second largest theme was *Pursuing own development*, and was characterised by the participating occupational therapists desire to develop their skills and the need for a change. Our results correspond with previous research demonstrating that the attractiveness of a profession is affected by the work environment, work conditions and opportunities for professional development [5].

Facing work environment deficiencies

Stress and high work pressure, not being paid a salary that is perceived as fair (unfairness/injustice), insufficient leadership and a dysfunctional organization (e.g. limited support from the manager) and not being appreciated and valued for one's knowledge were described as contributing to the consideration to leave the profession. These are all described in previous research as important factors for mental health at work [6]. For example, high work demands, low control, and imbalance between effort and reward [23] along with a lack of team climate [6] have individually, and particularly when combined, been shown to be risk factors for the development of mental health problems in the form of depression and anxiety among the Swedish and Norwegian working populations [24,25]. In contrast, when an employee experiences a positive quality in their work life this can lead to enhanced organizational commitment and a reduced inclination to leave an organization [26]. Additionally, factors such as high control and fairness are shown to reduce the risk of sick leave due to mental health problems [23]. Our results should be reflected upon urgently as the quality of rehabilitation is jeopardized if many occupational therapists consider leaving their profession. To reverse the exodus from the occupational therapy profession, healthcare managers need to increase their knowledge of occupational therapy, reward the efforts of occupational therapists, include them in decisions that affect their professional activities, and give them a fair salary. To reduce staff turnover, the healthcare sector needs to be perceived as an attractive employer [1,27]. To be attractive, these fundamental work environment deficiencies must be addressed [4,23]. Encouragingly, research shows that managers want to support their employees but because of a lack of mental health literacy can be hesitant to work proactively toward employees with mental health problems [28].

Several of the participating occupational therapists described stress and high work pressure as resulting in development of mental health problems. This is consistent with several previous studies that show that deficiencies in both the organizational and social work environment can lead to various forms of mental health problems [11,12,29–33], including anxiety and depression [12,29]. Additionally, Reis et al. [34] have shown that exhaustion disorder is a major risk among occupational therapists. Previous research performed on the same data as the present study showed that occupational therapists could experience mild to moderate stress symptoms but also lasting symptoms of stress, which potentially indicates exhaustion disorder due to their work [19]. In the study by Gupta and colleagues [35], 34.8% of the included occupational therapists experienced a high level of stress and exhaustion, indicating a risk of developing a pronounced exhaustion disorder. The results of this study clearly demonstrate how work environment deficiencies such as stress and high work pressure can affect occupational therapists, leaving them dissatisfied with their job, at risk of developing mental health problems and at risk of leaving their profession. This needs to be addressed not only by managers but also at a political level to prevent inadequate services for patients. There is however a need to verify these results in a quantitative predictor study.

Pursuing own development

The second largest theme was *Pursuing own development* and included the desire to develop one's skills and a need for a change resulting from lack of career advancement opportunities including professional development and being tired of the profession. We believe that the theme *Pursuing own development* is strongly linked to the theme *Facing work environment deficiencies*. In an organization, where employees feel they can grow and develop their skills, where there is a positive and supportive leadership and where the work pressure is manageable, the desire to leave the profession could be limited [13]. We strongly believe occupational therapists desire to pursue their own development should be fulfilled within the organization by letting them to take part in courses and training programs to develop their skills. Lack of development opportunities, combined with work environment deficiencies, will naturally affect the occupational therapists' expectation of a future in the organization. Previous research performed on data from the same online survey as the present study

showed that about half of the participating occupational therapists were not satisfied with provided opportunities for professional development [19]. In a previously performed study by Cosgrave et al. [16] among early-career nursing and allied health professionals, turnover intention was strongly affected by access to continuing professional development. A further study should explore occupational therapists' intention to leave their current jobs to pursue their own development and examine if there are significant correlates to career advancement and organizational and leadership factors. There is also a need explore knowledge among healthcare service managers regarding the occupational therapy profession and occupational therapists' solutions for improvement of organizational deficiencies and work environment obstacles. Studying the reasons why occupational therapists and other healthcare professionals stay in their professions might also be fruitful.

Methodological considerations

Several features increase the trustworthiness of this study. Credibility, i.e. the truth and believability of data, is reflected in the focus of the study, how well the data and analysis address the intended aims, how participants were selected and data collection methods used [21]. There are several limitations that need to be considered when reading the results of the present study. One limitation is the low response rate (48%) in the national survey of which this study is a part. However, this sample is representative of the age and gender of Swedish occupational therapists (Personal communication Martin Östberg, the Swedish Occupational Therapists Association). In addition, this study only encompasses the responses of the occupational therapists who answered the survey and who had serious intentions to leave their profession. Against that background, the results need to be viewed with some caution since they do not reflect proportionately on all occupational therapists in Sweden who are considering leaving their profession. Furthermore, when using qualitative methods, the goal is a deeper understanding of the phenomena and not statistical generalization [34]. To enhance transferability to other contexts and settings, characteristics of the included participants and the study setting were described, and direct quotations were added, in keeping with Graneheim and Lundman [21]. Consequently, there is a need to perform a quantitative predictor study to understand whether this study

is generalizable to all Swedish occupational therapists who consider leaving the profession.

Manifest content analysis with a summative approach [21] was applied, and worked well to count the frequency of words in the answers and for the authors to interact deeply with the analysis material. Even though participant statements were often short, analysing the volumes of survey data was a complex task and this may have impacted study credibility. The chosen method nevertheless proved to work well with this volume of data. Searching the data for specific words and short sentences given by the participants, and subsequently calculating the sum of those words was valuable. To enhance the credibility during the data analysis, the authors moved back and forth between the different steps in the analysis to make sure that the meaning of the participants' statements was not lost during the different steps in the analysis. To further strengthen the analysis, the authors analysed the data independently and came to an agreement on the themes and the categories. To enhance dependability, i.e. the reliability of the results [20], pre-written questions were used to ensure that all participants had the opportunity to answer the same question set.

Conclusions

This article provides important new insights regarding the underlying reasons why occupational therapists may seriously consider leaving their profession. Improving the work environment is necessary to increase the probabilities of occupational therapists remaining in the profession and enjoying long professional careers. Organizational and leadership problems need to be addressed in order to create a more positive work environment. With a shortage of occupational therapists, there is an increased likelihood that patients will not receive valuable occupational therapy services [36]. Organizations and managers must increase their understanding of how their organization and leadership is perceived among occupational therapists. Furthermore, organizations where occupational therapists work may benefit from developing and implementing a strategy to increase the organizational capacity to promote mental health by creating a positive work environment. A positive work environment to enhance mental health for occupational therapists should include a reasonable workload, skills development and career paths, greater influence of occupational therapists over their work situation and fair payment.

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No potential conflict of interest was reported by the author(s).

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