

A Review of Work Readiness and Job Satisfaction Among Occupational Therapist

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ABSTRACT

The preparation of graduates who are ‘employable’ and ‘work-ready’ has become increasingly important. Students need to be ‘job ready’ on graduation to engage immediately and effectively within their workplace. Job satisfaction is an important research area for several reasons. This review was conducted to explore the work readiness and job satisfaction among occupational therapist. Studies included in this review were identified by keyword searches from EBSCO Medline, EBSCO Psychinfo, and EBSCO ERIC databases. Manual searches from the reference lists of the included studies was also conducted. Work readiness and job satisfaction has been identified as an important component during the transition from an occupational therapy student to an occupational therapist at work. Further research on work readiness and job satisfaction of occupational therapist can contribute to promoting the welfare of occupational therapists as well as the quality of service delivered.

Keywords: work readiness, preparedness for practice, job satisfaction, occupational therapist, transition experiences

INTRODUCTION

Department of Statistics in Malaysia reported that, in general, the Malaysian unemployment rate of labour force in October 2018 stood at 3.3%, marking an increase of 2.4% compared to October 2017. Among unemployed fresh graduates in Malaysia, degree holders constitute the highest percentage of unemployment at 26%. From the graduate unemployment percentage, 50% of the graduates were from public universities (National Education Statistics : Higher Education Sector 2017).

Lack of industrial training and work experience were highlighted by Omar and Rajoo (2016) in the International Journal of Economics, Commerce and Management as primary reasons for graduate unemployment in Malaysia. A study conducted by Graham and Mckenzie (1995), suggested that the study-to-work transition is crucial in preparing students for work. Graduates leave school and transitions from school to workplace with the assumption that they are fully prepared. However, employers criticise their lack of suitable skills and qualifications that meet the needs of employment industry. These unemployed graduates were also found to have weaker employability skills (Ismail et al. 2011).

The study-to-work transition is an important time for graduates to develop their own identity and understand the meaning of a career (Stokes & Wyn 2007). Employers' perception towards Malaysian graduates revealed

that 17% of employers were not satisfied with graduates from public universities, compared to graduates from private and foreign universities in Malaysia (Cheong et al. 2016).

Work readiness can be defined as the extent to which graduates are perceived to possess the attitude and attributes to make them prepared or ready for success in the work environment (Caballero et al. 2011). The preparation of graduates who are ‘employable’ and ‘work-ready’ has become increasingly important. Students need to be ‘job ready’ on graduation to engage immediately and effectively within their workplace (Billett 2009). Employability was also found to be less to the act of ‘securing’ the job, and more to the ability to be successful, to feel empowered, to adapt and change (Harvey 2005).

There is evidence that graduates may not be well prepared for the realities of employment no matter how well the educators prepare them to be. Communication capacity were identified as a major problem for university graduates in a multidisciplinary study (Litchfield et al. 2010). In a study among British occupational therapy graduates on their fitness to practise, differences between the experiences of new graduates, and the expectations of supervisors and employers were uncovered (Barnitt & Salmond 2000). New therapists were identified as being unprepared for the pressures of the work environment, contributing to disillusionment, which the authors stated, could impact negatively on

retention and lead to health problems. Supervisors appeared to want proficiency in technical skills, and employers (presumably managers of both graduates and their supervisors) wanted global skills that would benefit the whole service such as organisational, reflective and problem solving skills.

Job satisfaction is defined as the attitude a worker has towards his or her profession (Weiss 2002) and is often expressed as a pleasurable response of liking and disliking the work itself, the rewards such as pay, promotions, recognition or the contexts, working conditions and colleagues (Vandenbos 2007). Job satisfaction is an important research area for several reasons. In Anglo-American literature, it has been found crucial to ensure quality of work, decrease job attrition, promote personal growth and maintain physical and psychological health (Painter et al. 1995). Health professionals who experience poor wellbeing at work such as high levels of burnout or low levels of job satisfaction, are more likely to leave their positions (Hayes et al. 2006) and are less likely to provide services of the highest quality (Aiken et al. 2012).

The objective of this review is to summarize and integrate the extant literature dealing with job satisfaction and work readiness among Occupational Therapist during the transition from Occupational Therapy student to an Occupational Therapist at work.

METHODOLOGY

Search process

Articles were retrieved from an initial search for qualitative and quantitative studies involving work readiness and job satisfaction among occupational therapist. The final selection was based on these inclusion criteria: i) job satisfaction ii) work readiness and iii) occupational therapy. The exclusion criteria were: i) studies on burnout and ii) turnover. Accessible studies published from 2006 to 2017 were included in the search. The sources of the previous studies were electronic databases such as EBSCO Medline, EBSCO Psycinfo and EBSCO ERIC databases. Keywords searched included 'work readiness', 'preparedness for practice', 'job satisfaction' in combination 'occupational therapist' in which 'transition experiences' yielded the most relevant materials. Manual searches from the reference lists of the primary articles were also conducted.

Data extraction

In keeping with a standardised assessment of data extraction, a framework was used as a guidance of the review procedures (Spencer et al. 2003). It has tools consisting of appraisal questions that covers the different stages of assessment process; findings, design, sampling, data collection, analysis, reporting, reflexivity and neutrality and ethics and auditability. Four ratings were used for the quality assessment, low, medium, high and very high. The ratings and their specific requirements are tabulated in Table 1.

RESULTS

The keywords used in the initial search were work readiness, preparedness for practice, job satisfaction, occupational therapist and transition experiences. From the initial search, using three main databases, 612 studies were identified for possible and relevant inclusion. After abstract evaluation or full study review, 554 studies were excluded and 58 studies were retrieved for detailed examination. Out of these 58 studies, only ten study met the criteria. The searches yielded five studies that were selected for quality assessments in which five of them were quantitative studies (Doherty et al. 2009; Hodgetts et al. 2007; Mccombie & Antanavage 2017; Scanlan & Still 2013; Sewpersad et al. 2016) and four were qualitative studies (Brockwell et al. 2009; Moore et al. 2006; Robertson & Griffiths 2009; Tariah et al. 2011). Manual searches from the reference lists of the articles were also conducted. This method yielded a quantitative study (Gray et al. 2012) (Flowchart 1).

Table 2 and Table 3 show the framework that was used for data extraction. Most of the studies have a clear purpose of study, relevant literature review and has sample size that was described in detail and justified. Most of the studies also have appropriate analysis method, conclusion and reported the clinical importance of their study. Table 4 and 5 show the key metric for work readiness and job satisfaction on selected studies. The quality assessment for most of the studies in this review was range from medium to very high. Most of the studies used either semi-structured interviews, phone call interviews, online survey, focus group discussion or combination of these methods.

TABLE 1. Quality assessment guidelines

Rating	Requirements
Low	Data too invariable, due to inadequate analysis or sampling strategy ; data do not "ring true" and it appears that the authors had superimposed their own set of ideas
Medium	Analysis descriptive in nature and somewhat "thin" in describing context and detail, leading to appearance of superficiality
High	Descriptive but including a more adequate level of analysis, with consideration of context, presentation of a more nuanced picture of study participants and the complex environment in which they function
Very high	Required a theoretical focus, with consideration of the internal processes involved in creating the situation that was being described (for example, links to macro structures), and with an explanatory value that could be transferred to other research areas

FLOWCHART 1. Flowchart detailing stages of narrative review

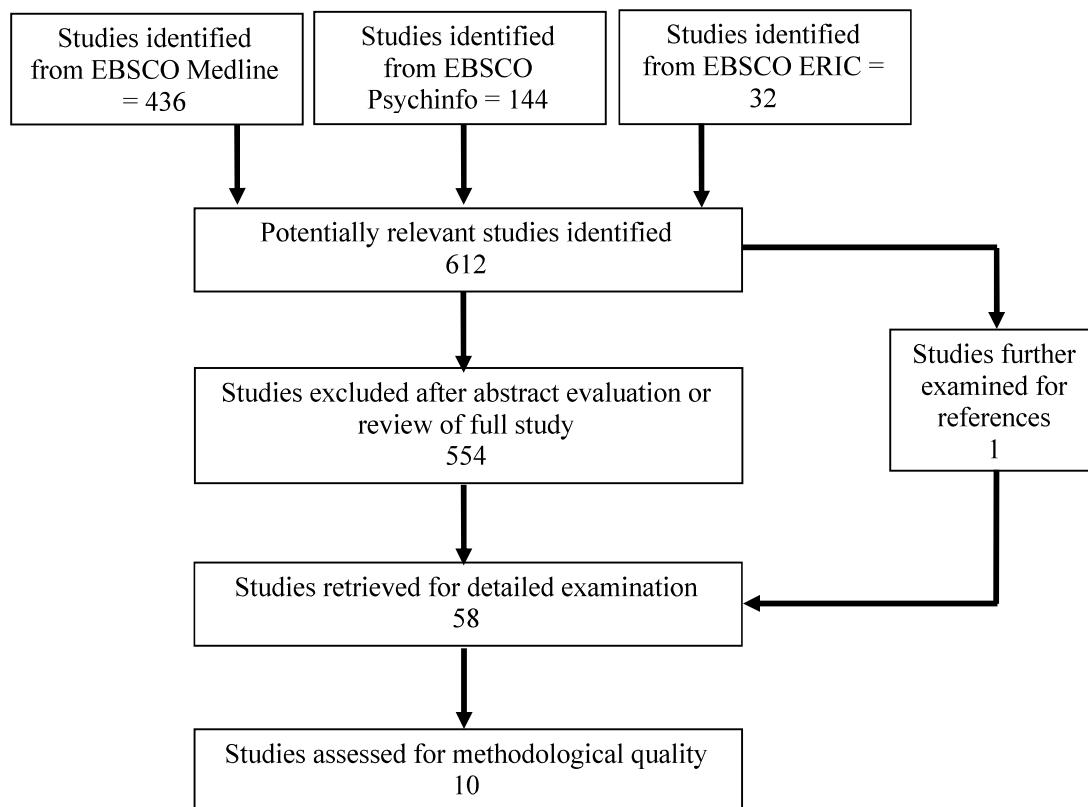


TABLE 2. Appraisal questions for studies included in Work Readiness

	(Hodgetts et al. 2007)	(Doherty et al. 2009)	(Robertson & Griffiths 2009)	(Brockwell et al. 2009)	(Gray et al. 2012)
Study purpose					
Was the purpose clearly stated?	✓	✓	✓	✓	✓
Literature					
Was relevant background literature reviewed?	✓	✓	✓	✓	✓
Sample					
Was the sample described in detail	✓	✓	✓	✓	✓
Was sample size justified?	✓	✓	✓	✓	✓
Outcomes					
Were the outcome measures reliable?	NA	NA	NA	NA	NA
Were the outcome measures valid?	NA	NA	NA	NA	NA
Intervention					
Intervention was described in detail?	NA	NA	NA	NA	NA
Contamination was avoided?	NA	NA	NA	NA	NA
Co-intervention was avoided?	NA	NA	NA	NA	NA
Results					
Results were reported in terms of statistical significance?	✓	✓	NA	NA	✗
Were the analysis method(s) appropriate?	✓	✓	✓	✓	✓
Clinical importance was reported?	✓	✓	✓	✓	✓
Drop-outs were reported?	✗	✗	✗	✗	✗
Conclusions and Implications					
Conclusions were appropriate given study methods and results	✓	✓	✓	✓	✓

NA=Not applicable; ✗=No; ✓ =Yes

TABLE 3. Appraisal questions for studies included in Job Satisfaction

	(Moore et al. 2006)	(Tariah et al. 2011)	(Scanlan & Still 2013)	(Sewpersad et al. 2016)	(Mccombie & Antanavage 2017)
Study purpose					
Was the purpose clearly stated?	✓	✓	✓	✓	✓
Literature					
Was relevant background literature reviewed?	✓	✓	✓	✗	✓
Sample					
Was the sample described in detail?	✓	✓	✓	✓	✓
Was sample size justified?	✓	✓	✓	✗	✓
Outcomes					
Were the outcome measures reliable?	NA	NA	NA	NA	NA
Were the outcome measures valid?	NA	NA	NA	NA	NA
Intervention					
Intervention was described in detail?	NA	NA	NA	NA	NA
Contamination was avoided?	NA	NA	NA	NA	NA
Co-intervention was avoided?	NA	NA	NA	NA	NA
Results					
Results were reported in terms of statistical significance?	NA	NA	✓	✗	✓
Were the analysis method(s) appropriate?	✓	✓	✓	✓	✓
Clinical importance was reported?	✓	✓	✓	✓	✓
Drop-outs were reported?	✗	✗	✗	✗	✓
Conclusions and Implications					
Conclusions were appropriate given study methods and results	✓	✓	✓	✓	✓

NA=Not applicable; ✗ =No; ✓ =Yes

TABLE 4. Key metrics and findings for included studies in Work Readiness

Study	Location	Type/Method	Participants	Recruitment	QA	Focus of study
(Hodgetts et al. 2007)	Edmonton, Canada	Quantitative/Structured survey, focus group, telephone interviews	(n=85) recent occupational therapy graduates and (n=159) long term occupational therapy graduates	Occupational therapist from the graduating classes of 2001 to 2005 of a university	High	Perspectives of occupational therapy students and graduates regarding satisfaction with their professional education and preparedness for practice
(Doherty et al. 2009)	Geelong, Australia	Quantitative/Self-administered questionnaire	(n=18) Bachelor of Occupational Therapy graduates	Occupational therapist who graduated in 2005 from the first cohort of students from a university	High	Graduates perception on preparedness for practice
(Robertson & Griffiths 2009)	Otago, New Zealand	Qualitative/Focus group discussion	(n=15 to n=24) Three focus groups of graduates . Each groups with five to eight participants	Past graduates of occupational therapy degree course	High	Perceptions of graduates regarding their preparedness for practice
(Gray et al. 2012)	Australia, Aotearoa /New Zealand	Quantitative/Online survey	(n=178) newly graduated occupational therapist from Australia and (n=53) newly graduated occupational therapist from Aotearoa /New Zealand	Occupational therapy registration boards, snowball sampling	High	Perceptions of graduates regarding their education and work preparedness
(Brockwell et al. 2009)	Queensland, Australia	Qualitative/Self-report questionnaires and semi structured in-depth telephone interviews	(n=15) graduates from the first cohort of a university	First cohort of occupational therapy graduates from a university	Medium	Graduates perceived preparedness for practice and their work destinations

*QA=quality assessment

TABLE 5. Key metrics and findings for included studies in Job Satisfaction

Author	Location	Study/Method	Participant	Recruitment	QA	Focus of study
(Moore et al. 2006)	New South Wales, Australia	Qualitative/Individual, semi structured interviews	(n=14) occupational therapists working in the health sector of the greater metropolitan area of Sydney, NSW	Occupational therapists working in the health sector of the greater metropolitan area of Sydney, NSW	High	Factors that contribute to job satisfaction
(Tariah et al. 2011)	Amman, Jordan	Qualitative/Explorative qualitative study, structured open-ended written questionnaires	(n=93) occupational therapists in hospitals, special education centres, rehabilitation centres and schools	Hospitals, special education centres, rehabilitation centres and schools	High	Factors influencing job satisfaction and dissatisfaction
(Scanlan & Still 2013)	Sydney, Australia	Quantitative/Survey (pen and paper and online)	(n=34) occupational therapists in a metropolitan public mental health service	All staff of a large metropolitan public mental health service	Medium	Factors related to job satisfaction of occupational therapist
(Sewpersad et al. 2016)	South Africa	Quantitative/Cross-sectional survey, online	(n=49) occupational therapist in various settings	Occupational therapists working in various settings	Medium	Job satisfaction of occupational therapists
(Mccombie & Antanavage 2017)	United States	Quantitative/Multipage questionnaire including both open and closed-ended questions	(n=202) occupational therapist with American Occupational Therapy Association (AOTA) membership	Members of the American Occupational Therapy Association	Very high	Transition of occupational therapy student to practising occupational therapist

*QA=quality assessment

Work readiness

Hodgetts et al. (2007) explored the perspectives of occupational therapy students and graduates on satisfaction with their professional education and preparedness for practice while Gray et al. (2012) studied feelings of preparedness for practice among new graduate occupational therapists in Australia and Aotearoa (New Zealand). Gray et al. (2012) reported only 17.1% of Australian new graduates and even fewer, 8.5% of Aotearoa (New Zealand) new graduates felt very well prepared. Professional competency ranked lowest for both graduate groups for ability to demonstrate occupational therapy techniques to students or demonstrate the role of occupational therapy, evaluate occupational therapy programmes within the organisation or evaluate the effectiveness of activities, plan

intervention based on evidence-based practice or use professional literature and resources and present clearly written evaluation reports to team members.

Doherty et al. (2009) noted that graduates felt adequately prepared to enter the occupational therapy profession and workforce. These findings showed that graduates perceived self-confidence was related to confidence in clinical decision-making, a positive self-view of knowledge and skills for practice on completion of their degree, a positive self-view of knowledge and skills for practice since being employed and an overall perception that their undergraduate program prepared them to enter the workforce and practice as an occupational therapist.

Similarly, a study on the reflections of new graduates on their preparation for practice was reported by (Robertson & Griffiths 2009). Three themes that were clearly identified in the focus groups of this study were the purpose of supervision, the shift from 'knowing about' to 'knowing how', and the need for multiple types of communication skills. The challenges faced by new graduates during their practice were searching for role clarity as an individual and team player, inadequate supervision by employers, lack of skills and uncertainty in team responsibility, coupled by a lack of confidence. However, they were able to research and find information in response to gaps in their knowledge.

Brockwell et al. (2009) conducted a study to ascertain graduate perceived preparedness for practice from a regional occupational therapy program. They compared the preparedness of practice between rural and urban therapists graduated from the same university. This study concluded that the rural therapists in this study appeared to perceive all subjects within the curriculum useful in preparing them for the workforce, compared with their urban counterparts.

Job satisfaction

Moore et al. (2006) explored factors that contributed to job satisfaction among occupational therapists working in the health sector of the greater metropolitan area of Sydney. This study concluded that job satisfaction in occupational therapy was derived from the sense of achievement felt when providing effective clinical care. Job dissatisfaction stemmed from the poor profile and status of the profession. Job satisfaction can also be increased by promoting measures to ensure clinical effectiveness and by enhancing the profile of occupational therapy.

Similarly, another study was conducted by Scanlan and Still (2013) to examine factors related to job satisfaction in a group of therapist in mental health. Job satisfaction was associated with rewards such as remuneration and recognition as well as cognitively challenging work. Results from this study suggested that occupational therapy educators and mental health managers should focus more on promoting self-care and support strategies to enhance resilience, in improving management and leadership styles and promoting therapeutic optimism through the adoption of recovery-oriented practice principles.

A qualitative study by Tariah et al. (2011) studied factors that influenced job satisfaction and dissatisfaction among Jordanian occupational therapist. This study revealed four themes related to job satisfaction, 'a humanistic profession', 'professional issues', 'work benefits' and 'work environment'. One theme was revealed for improving job satisfaction, 'a call for improvement'. This study also suggested that a collaboration between individual practitioners, representatives of the profession, government and hospital administrators is necessary to enhance occupational therapy profile in Jordan.

Mccombe and Antanavage (2017) examined the transition from occupational therapy students to practicing occupational therapists over the course of one's first year of professional employment. This study revealed that having a strong mentor was the primary determinant for high job satisfaction. Recommendations such as providing senior mentor or an experienced supervisor as a source for professional guidance and personal support was also made.

Another study conducted by Sewpersad et al. (2016) on occupational therapist working in various setting in South Africa revealed that occupational therapist experienced the highest level of satisfaction with the nature of their work, operating conditions and working with co-workers whilst salary was a major source of dissatisfaction. Recommendation was made to employing bodies to evaluate components of job satisfaction amongst occupational therapists to ensure that suitable career path opportunities are developed for them as part of the retention policy of the employing body.

DISCUSSION AND CONCLUSION

This study summarized and integrated the extant literature dealing with work readiness and job satisfaction among Occupational Therapist during the transition from Occupational Therapy student to Occupational Therapist at work.

Transition from student to therapist inflicts anxiety among students approaching the end of their educational program and also among graduates as they prepare to enter the workforce (Hodgetts et al. 2007). Anxiety alone is not the only common perception for them (Tryssenaar & Perkins 2001). These students and recent graduates also experience feeling of inadequate preparation to enter workforce in terms of practical skills (Hodgetts et al. 2007).

Other studies on students' perceptions also reported similar findings (Lee & Mackenzie 2003; Tryssenaar & Perkins 2001). However, long term graduates remarked that they felt better prepared for their work after changing their positions one or more times even though it could be a different area of practice. This indicated that professional experience rather than technical skills is the key (Hodgetts et al. 2007).

The opportunity to further education was seen as an important factor for job satisfaction among occupational therapist (Mccombie & Antanavage 2017; Tariah et al. 2011). However, this finding contraindicates studies in which extrinsic factor such as the opportunity to further education was discovered as inferior to intrinsic factors such as personal development, feeling valued as an employee and diversity of practice when it comes to job satisfaction. Diversity of practice for job satisfaction is supported by Scanlan and Still (2013), whereby occupational therapist working in mental health highlighted cognitive demands as higher job satisfaction along with receiving rewards and recognition. Tariah et al. (2011) also found that job satisfaction is associated with case varieties.

It has been reported that job satisfaction was related to providing an effective clinical care while job dissatisfaction was related to poor profile and status of profession (Moore et al. 2006). Relationship with colleague, team members, other health team members (Tariah et al. (2011) and non-occupational therapy workers (Mccombie & Antanavage 2017) were also identified as factors influencing job satisfaction. Other factors associated with job satisfaction are opportunity to exercise passion working with people, therapeutic relationship with clients and their family, improvement in clients' condition, and gaining new skills and knowledge (Tariah et al. 2011). Job satisfaction was further associated with good mentorship, clinical skills, realistic caseload, opportunity to further education, and developing interdisciplinary relationship with non-occupational therapy workers (Mccombie & Antanavage 2017). Occupational therapists appeared to experience the highest level of satisfaction with the nature of their work, operating conditions and working with co-workers, whilst pay or salary was a major source of job dissatisfaction (Sewpersad et al. 2016).

In conclusion, a longer duration of study on the clinical placement, work readiness and job satisfaction of undergraduates may give better

preparation for work readiness with many factors contributing for job satisfaction.

STUDY LIMITATION

Quantitative and qualitative studies published on work readiness and job satisfaction were limited in detail. In this article, work readiness and job satisfaction were identified as important components during the transition from an occupational therapy student to an occupational therapist at work. Research from other countries such as, New Zealand, Australia and Jordanian dominated this literature but these countries have very different findings. Further research on work readiness and job satisfaction of occupational therapist can contribute to promoting the welfare of occupational therapists as well as the quality of service delivered.

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