

Occupational Therapists Professional and Sociodemographic Profile in Paraná, Brazil

Perfil profissional e sociodemográfico dos terapeutas ocupacionais do Estado do Paraná, Brasil

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RESUMO: O conhecimento do perfil dos terapeutas ocupacionais, tendências na formação e mercado de trabalho permitem o vislumbre da identidade da profissão e a projeção de tendências futuras. **Objetivo:** Traçar o perfil profissional e sociodemográfico de terapeutas ocupacionais do Paraná em 2015. **Método:** Pesquisa quantitativa, observacional, de caráter transversal, realizada por meio de questionário respondido por amostra representativa de 188 dos 680 profissionais inscritos no Conselho Profissional. **Resultados:** O conjunto de profissionais do Paraná inscritos é constituído predominantemente por mulheres jovens e se concentra na capital do estado. A maioria graduou-se nos últimos 10 anos, possui pós-graduação *latu sensu*, porém poucos possuem mestrado ou doutorado. A maioria trabalha exclusivamente na profissão, num único emprego, em instituição pública, com carga horária de 6 horas diárias. As principais áreas de atuação são Saúde Mental, Saúde Funcional, Contextos Sociais e Contextos Hospitalares. A renda mensal varia entre o piso e 4 mil reais. **Conclusão:** Nos últimos 15 anos houve aumento expressivo no número de profissionais e na qualificação deles. O perfil profissional demonstrou que a profissão está em fase de amadurecimento e consolidação no mercado de trabalho.

DESCRITORES: Terapia ocupacional; Ocupações em saúde; Inquéritos demográficos.

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ABSTRACT: The knowledge on the occupational therapists profile, trends in education and the labor market, allows us to have a glimpse of the profession identity and project future trends. **Objective:** To describe the professional and socio-demographic profile of Paraná occupational therapists in 2015. **Method:** This is a quantitative, observational and cross-sectional research, performed by means of a questionnaire answered by a representative sample of 188 of the 680 registered professionals in the Professional Council. **Results:** The Paraná professionals constitute predominantly young women and live on the state capital. Most graduated in the past 10 years, *latu sensu*, but few have master's or doctorate degree. Most works exclusively in the profession, a single job, in a public institution, with a schedule of 6 hours daily. The main areas of focus are Mental Health, Functional Health, Social Contexts and Hospital Contexts respectively. The monthly income varies between the wage floor and 4 thousand Brazilian Reais. **Conclusion:** In the last fifteen years, there has been significant increase in the number of professionals and qualification of these. The professional profile demonstrated that the profession is maturing and consolidation in the labor market.

KEYWORDS: Occupational therapy; Health occupations; Population surveys.

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INTRODUCTION

Occupational Therapy is a field of knowledge and intervention in health, education, and social sphere that brings together technologies oriented towards the emancipation and autonomy of people who, for reasons related to specific, physical, sensorial, mental, psychological and/ or social problems, present temporary or definitive difficulties in insertion and participation in social life¹.

The decree-law 938, of October 13, 1969, regulates the profession and defines the professional activities, rights and duties of the occupational therapist, ensuring the professional autonomy².

The profession increased from 29 undergraduate courses in 2001 to 73 in 2014, with another Postgraduate *Strictu Sensu* Program at the Federal University of São Carlos – UFSCar³.

Currently, in Brazil, there are 17,500 registered professionals in the system - Federal Council of Physiotherapy and Occupational Therapy/ Regional Councils of Physiotherapy and Occupational Therapy (COFITTO/ CREFITOs)⁴. The Brazilian population is estimated at more than 204 million inhabitants, which gives an average of 0.9 occupational therapist for every ten thousand inhabitants⁵. The *World Federation of Occupational Therapy* (WFOT), in a study on human resources in 2014, announced that the world average is two professionals per ten thousand inhabitants⁶. These data point to the existence of a work field for occupational therapists in the Brazilian market.

In Paraná state, this proportion is even lower, from 680 professionals to a population of more than eleven million inhabitants, there is an average of 0.06 occupational therapist per thousand inhabitants⁷.

The maturation and consolidation of a profession depends on the work of its professionals, in which knowledge is broadened and improved, generating guidelines for an efficient and effective professional activity⁸. In other words, integration of individual experiences in the professional performance, associated with quality scientific evidence knowledge available in literature, and legislation framework regulating the professional practice generated the clinical practice^{2,8}.

A consolidated health profession can prepare its members to meet the population needs, as well as anticipate future demands. This consolidation is linked to knowledge of available labor force, trends in their education, scientific production, and labor market, identifying deficiencies and expertises for future trend design and plans⁸.

Class entities, especially professional councils, due their role of supervising the professional exercise, have the duty to point out the deficiencies and professionals potential that compose their category⁹. The university, on the other hand, has the duty to adapt the education processes to professional action demands¹⁰. Researches for professional and socio-demographic profile knowledge is a way to reality knowledge, and actions planning of class entities and educational institutions in favor of the profession development.

In face of this demand and few studies addressing the occupational therapist profile in Paraná state, the Regional Council of Physiotherapy and Occupational Therapy of the Eighth Region (CREFITO 8), in partnership with the Federal University of Paraná (UFPR), decided to carry out this research.

OBJECTIVE

To describe the professional and socio-demographic profile of Paraná occupational therapists in 2015.

METHODOLOGICAL PROCEDURES

This is a quantitative, cross-sectional, observational and descriptive research, carried out in partnership between UFPR and CREFITO-8.

The studied population was 680 occupational therapists registered in CREFITO-8, Paraná State Jurisdiction. A sample calculation with 90% confidence was performed, totalizing a final sample of 188 participating professionals. All occupational therapists professionals registered in CREFITO-8 were invited to participate voluntarily, through e-mail, social media, and institutional website.

This research followed the resolution 466/12, and had an assent of the Research Ethics Committee in Human Beings of the Health Sciences sector of Federal University of Paraná (CEP-UFPR), number 1.062.506, of May 13, 2015. Information were collected through a semi-structured questionnaire, created specifically for this purpose and based on questionnaires used in similar surveys^{8, 11, 12, 13}.

The questionnaire, made by Google Forms application, consisted of 35 questions, which 33 were closed and two were opened. For this research, the first 188 questionnaires answered between May and August 2015 were used.

After answers obtaining, data were organized in Excel 2010 tables, and questions were grouped in three main topics: Socio-demographic Profile, Education Profile, and Professional Profile. This publication considered only closed questions. It is worth noting that in questions related to specialization and professional performance areas, the terminology proposed by COFITTO was used for

professional specialty areas, with the addition of teaching and other items.

Numerical variables were categorized in age, with age groups of ten years; graduation year (graduation, specialization, master's, and doctorate), in graduation time of five years; and cities of macro-regions.

Data were analyzed in SPSS version 22.0. All professional and socio-demographic profile results were described by means of absolute frequency and percentage. The variable income range was associated and correlated to the following variables: age group, graduation time, and professional agreement, using Chi-square test and Pearson's correlation, with statistical significance stipulated in 95%.

RESULTS

Sociodemographic profile

The socio-demographic characteristics showed that 91% of the professionals are women, 82.4% are between 21 and 40 years old, the majority, 54.8% live in a marital union, and 62.2% do not have children or dependents.

CREFITO-8, for inspection purposes, divides Paraná State in four macro-regions: Curitiba, Cascavel, Londrina, and Maringá. Each macro-region is composed by their dominated city and by a group of cities in

its surroundings. The survey showed that most of the professionals live in the macro-region of Curitiba (61.2%), followed by Cascavel (18.1%), Londrina (12.2%), and Maringá (8.5%). It is noteworthy that 17.6% of the professionals work in a city different from their home, although in the same macro-region.

Education profile

Regarding graduation, 60.7% of the participants completed the course between 2006 and 2014 (Table 1). Paraná institutions graduated most of the respondent professionals (61.2%), followed by São Paulo institutions, which graduated 20.8%. 41.5% of Paraná professionals have graduated in a federal public institution.

As for *latu sensu* postgraduate course, 62.2% (117) have attended or are taking specialization course; from these, 60.7% (71) studied from 2011 (Table 1), and 9.3% (11) attended more than one area. These professionals distribution by expertise area is shown on Table 2.

With respect to *stricto sensu* post-graduation, only 10.1% attended or are taking a master's degree, with a higher occurrence from 2011 (42.1%). PhD degree has shown a lower rate, 2.1% of PhDs or PhD students, had qualified or entered in qualifying process from 2006 (Table 1).

Table 1 – Distribution in absolute (N) and relative (%) frequency of occupational therapists according to education and completion time

Course	Period	N	%
Graduation time	From 2011 to 2014	58	30.9
	From 2006 to 2010	56	29.8
	From 2001 to 2005	33	17.6
	From 1996 to 2000	18	9.6
	From 1991 to 1995	10	5.3
	Before 1990	13	6.9
	Total	188	100
Postgraduate Specialization	From 2011 to In Progress	71	60.7
	From 2006 to 2010	19	16.2
	From 2001 to 2005	18	15.4
	From 1996 to 2000	2	1.7
	Before 1995	7	6.0
	Total	117	100
Postgraduate Masters Degree	From 2011 to In Progress	8	42.1
	From 2006 to 2010	5	26.3
	From 2001 to 2005	5	26.3
	From 1996 to 2000	1	5.3
	Total	19	100
Postgraduate PhD	From 2011 to In Progress	1	25
	From 2006 to 2010	3	75
	Total	4	100

Table 2 – Distribution in absolute (N) and relative (%) frequency of occupational therapists by specialization field and expertise title

	Specialization field		Expertise Title	
	N	%	N	%
Mental health	45	34.4	5	41.6
Functional Health	30	22.9	0	0
Hospital Contexts	10	7.6	1	8.3
Collective Health	8	6.1	0	0
Acupuncture	7	5.3	2	16.6
Social Contexts	6	4.6	4	33.3
Family Health	2	1.5	0	0
Teaching	8	6.1	-	-
Others	15	11.5	-	-
Total	131	100	12	100

Professional profile

Only 2.7% of professionals who answered the questionnaire are not working in their field of expertise, 85.1% work exclusively in their field, and 12.2% work in other fields.

Regarding the number of jobs, 55.3% of professionals have a single job, 25% have two jobs, 12.8% have three jobs, 3.2% have more than three jobs, and 3.7% are unemployed.

Regarding the type of institution (public, private, or philanthropic), 52.5% of them work only in public institutions, 16.6% work only in private institutions, and 18.2% work in philanthropic institutions. The remaining 12.8% reported working in more than one of these three types of institution.

From those with public employment, 50.9% work in municipal institutions, 30.4% in state institutions, 14.3% in federal institutions, and 4.5% have more than one public job.

With regard to labor relationship, the majority, 38.9% are CLT employees (Labor Laws Consolidation), followed by statutory workers 30.8%, self-employed workers 23.1%, businessmen 3.2%, residents and scholarsmen totaling 2.7%, and finally, the members of a cooperative society 1.4%.

Regarding working hours, 37.2% of occupational therapists work six hours, 33% eight hours, 20.7% more than eight hours, and only 6.4% less than six hours a day.

Regarding the health-care level, 35.8% work in more than one health-care level, 43.6% work in tertiary-care level, 36.7% in secondary-care level, and only 15.5% work in primary-care level, besides 4.4% who work with teaching.

In professionals distribution according to practice area, 123 (65.4%) work in a single area, and 65 (34.6%) work in more than one area. It shall be considered that the same respondent can work in more than one area, totalizing a number of responses higher than the number of respondents (Table 3).

Table 3 – Distribution in absolute (N) and relative (%) frequency according to practice area.

Practice area	N	%
Mental health	90	30.4
Functional Health	79	26.7
Social Contexts	53	17.9
Hospital Contexts	27	9.1
Family Health	17	5.7
Collective Health	16	5.4
Teaching	12	4.1
Acupuncture	2	0.7
Total	296	100

It is observed that Mental Health present the highest number of active professionals (30.4%), followed by Functional Health (26.7%), Social Contexts (17.9%), and Hospital Contexts 9.1%. Thus, more than 84% of occupational therapists from Paraná work in these four practice areas.

In relation to monthly income, 55.6% (100) of occupational therapists receive wages between the minimum professional wage (R\$ 1,831.70) and R\$4,000, followed by 22.8% (41) with monthly income equal or lower than the wage floor, 18.9% (34) receive between R\$4,000 and R\$8,000, and 2.8% (5) receive more than R\$8,000 (Figure 1).

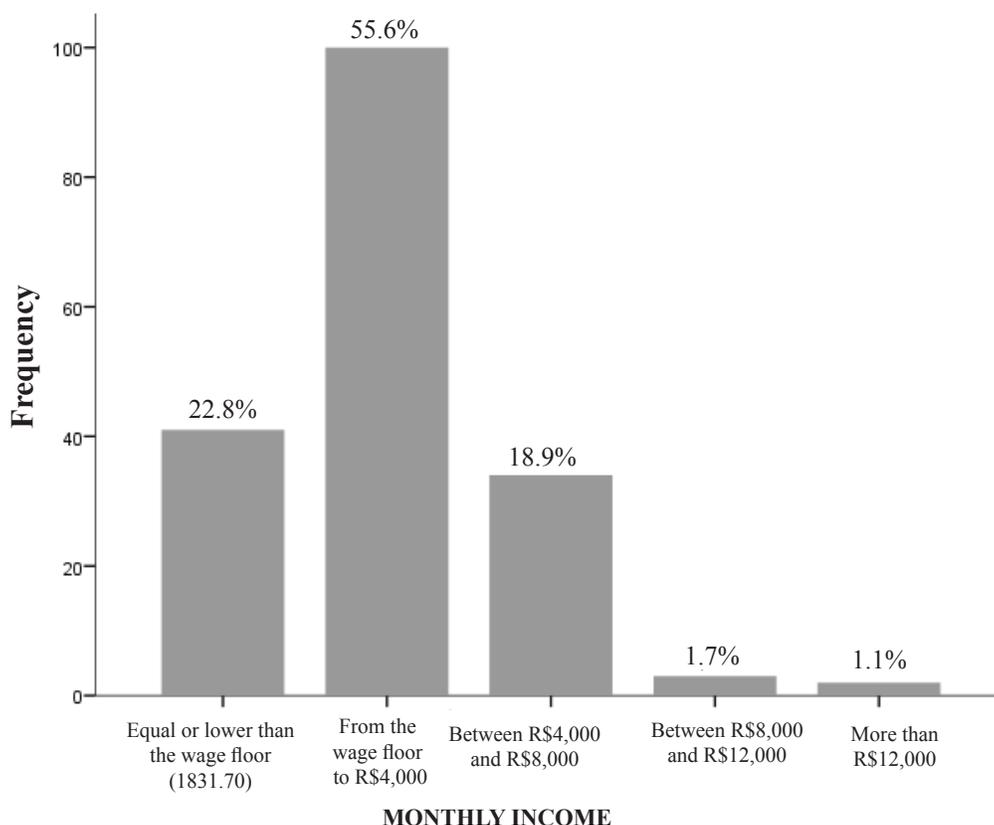


Figure 1 – Monthly income: numerical and percentage distribution

When evaluating the association between income and age group range, it is observed that they are dependent on each other ($X^2 = 47.812$ and $p < 0.001$), and have positive correlation ($R = 0.475$ and $P < 0.001$). The same is observed when testing the association between income range and education time ($X^2 = 89.821$ $p < 0.001$, $R = 0.558$ and $P < 0.001$). In income range equal to or less than the wage floor, predominate professionals between 21 and 30 years old (75.6%), graduated from 2011 to 2015 (56.1%). In income range from wage floor up to R\$4,000, there is a higher concentration of professionals from 21 to 30 years old (54%), graduated between 2006 and 2010 (32%). From those receiving between R\$4,000 and R\$8,000, 50% are between 31 and 40 years old, graduated between 2001 and 2005 (26.5%). Those in income range between R\$8,000 and R\$12,000, have the majority concentrated in the age group between 41 and 62 (66.6%), and who graduated before 1990 (66.7%). Finally, 100% of those who receive more than R\$12,000 are between 41 and 62 years old, and graduated before 1990.

Ratio analysis between permanent contract and income range of workers with only one job showed that contract type influences the wage ($X^2 = 62.779$, $p < 0.001$). The majority of workers with statutory or CLT contract have a monthly income between the wage floor and R\$4,000 (43.4% and 66.7%, respectively); however, the second largest group among statutory ones (41.5%) receives between R\$4,000 and R\$8,000, while the second largest group among CLT workers (31.7%) receives income equal to or less than the wage floor. Only the statutory ones reach the income range from R\$8,000. The highest group among self-employed workers is concentrated in the lowest income range (50%) followed by those with income between the wage floor and R\$4,000 (31.9%).

It is also observed the dependence relationship between the practice area from those who work exclusively in an area and a monthly income ($X^2 = 56.343$, $p < 0.001$). Although the predominant income range in all practice areas is the wage floor of the category up to R\$4,000, those working in Functional Health, Mental Health, Hospital

and Social Contexts, and Teaching are those reaching the income range higher than R\$4,000.

The participants were finally questioned about the main difficulties found in professional practice. The remuneration was identified as the main difficulty by 27.9% of the participants, followed by the lack of professional identity and recognition (23.7%), lack of improvement (22.2%), lack of access to scientific knowledge (10.1%), lack of autonomy (7.5%), lack of insertion (7.0%), and other difficulties (1.5%).

DISCUSSION

Due to studies scarcity of Paraná occupational therapists profile, other states occupational therapists profile studies were used for data discussion, as well as other professions in health area.

Women predominance was observed in other studies, such as the World Federation of Occupational Therapists survey published in 2014, showing that 83% of these professionals in the world are female, and in Brazil this percentage is 99%⁶. A research in Rio Grande do Sul showed that 93.6% of the state's occupational therapists are women¹⁴. Other health jobs presented a high percentage of women, which is evidenced in a research developed with Londrina's city physiotherapists, in Paraná State¹⁵ and another developed with nutritionists at a national level¹¹.

The high number of women in such professions seems to be related to moral background of health care, related to womanlike characteristics. Professions in the area of health currently contemplate the largest number of women^{16,17}.

The fact that most of these professionals are young (between 21 and 40 years old) corroborates with occupational therapist education and profile research in Rio Grande do Sul¹⁴. It is believed that this is related to education profile, i.e., the present study showed that 67% graduated in the past ten years, justifying by the offer increasing of undergraduate courses in Occupational Therapy.

In Paraná, until 2000, there was only one undergraduate course in private institution, offering 40 study vacancies per year. In 2005, the Federal University of Paraná – UFPR had graduated the first Bachelor's Degree program in Occupational Therapy. These two institutions together had graduated 61.2% of the survey respondents, and UFPR is the institution that most graduated professionals working in the state (41.5%). The fact that a public institution is the largest professional trainer in the state corroborates with data surveyed by Akutsu in 2008¹¹,

in his research with Brazilian nutritionists, showing that 51.4% were graduated in public universities.

The fact that most professionals have been graduated in the past ten years also happens with occupational therapists in Rio Grande do Sul, physiotherapists in Paraná, and nutritionists in Brazil^{11,14,15}. Certainly, this fact is related to vacancies expansion number in undergraduate courses of Occupational Therapy, in state and federal public universities of the country in recent years¹⁸.

Paraná professionals' concentration in Curitiba macro-region may be related to the fact that until 2014 the state only had undergraduate courses in the capital, indicating the need of such courses at inland town. An occupational therapist education and profile research in Rio Grande do Sul, observed a different situation from that of Paraná: most professionals (56.6%) are concentrated in state's countryside due to the decentralization of undergraduate courses at inland town¹⁴.

Most Paraná occupational therapists have or is taking a specialization, fact also observed among Rio Grande do Sul professionals¹⁴. The present study showed that most Paraná professionals have completed specialization in the past five years, meaning they probably have completed graduation in the past ten years. It is also related to the opening of multi-professional residency in health, which emerged from the law n° 11.129, of 2005, which encouraged a greater number of people to take specialization¹⁹.

Mental Health area stands out between specialization studied and the number of professionals with expertise title, given by COFFITO. Functional Health area is in second place among the most studied specializations; however, there is no occupational therapist with an expertise title in this area, because until the first half of 2016 the test for this specialty had not been offered yet, as well as for Collective Health and Family Health areas.

With respect to *stricto sensu* post-graduation, the research shows that 9.6% of the respondents have master's degree, and 2.1%, is PhD. Although these numbers are small, they demonstrate a growth, since in 1998 there was no occupational therapist with such degrees in Paraná²⁰. Perhaps the greatest currently challenge of the profession is the education of new researchers, who can improve and develop the knowledge in Occupational Therapy field¹⁸.

It is worth highlighting that most of the professionals reported having a single job, working six hours a day, which is in accordance with federal law n.8856, of March 1, 1994, which limits the working day in 30 hours a week aiming preserving the health, and reducing the physical exhaustion of professionals²¹. This data differs from

physiotherapists' reality in Londrina, PR, who work in different places, besides the fixed workload¹⁵. The study performed by Mângia et al.²² with occupational therapists in Mental Health field points out that "the enforcement of 30-hour contracts for occupational therapists, instead of protecting professionals, obliges them to assume two agreements, overloading them".

From the total number of professionals responding the survey, the majority (52.5%) work only in public institutions, of which, 50.9% work in municipal institutions responsible for operationalizing the activities of the Unified Health System - SUS. However, when asked about the labor agreement, 38.9% are CLT employees, and 30.8% statutory. According to these data, not all professionals working in public institutions are statutory, which may be related to public companies emerged in recent years that hire in CLT agreements.

Therefore, it is possible to infer that most of Paraná occupational therapists work in SUS, confirming a national trend described by Mângia¹⁰, which reports the insertion expansion of these professionals in SUS.

The survey showed that most of the professionals still work in tertiary care, following the profession history, which is traditionally rehabilitating. However, a significant number of professionals already work in secondary care, remaining only a small number in primary care, which is being stimulated and developed by the most recent public policies²³.

This research demonstrates that most of Paraná occupational therapists work in areas of Mental Health (30.4%), Functional Health (26.7%), Social Contexts (17.9%), and Hospital Contexts (9.1%), which are the most classic in the profession history.

The fact that Mental Health area has the highest number of occupational therapists can be justified by the greater development of public policies related to psychiatric reform in the past twelve years, with the creation of the Psychosocial Attention Network- RAPS, providing an occupational therapist as a member of the basic team²⁴. Probably, this greater number of jobs in Mental Health area has also stimulated a greater number of professionals attending specialization and taking test for expertise title. History appropriation and theoretical-practical references of psychiatric reform by undergraduate curriculum is another aspect that can be considered important, because it promoted a committed practice with the construction and implementation of the National Mental Health Policy².

On the other hand, Family Health, Collective Health, Acupuncture, and Teaching are areas with a lower number of professionals. According to statistical data from

CREFITO 8, only 5% of registered professionals work in Family Health area, 0.3% in acupuncture, and 3.7% with teaching.

The young professional's concentration number in income range from wage floor to R\$4,000 can be justified by results showing income dependence in relation to variables age group range and education time. The longer the education time and the age group, the higher the income range.

Occupational Therapy is a relatively young profession compared to other health professions, and its history in Paraná began in 1980, with the creation of the state's first undergraduate course. Its expansion has occurred in the past ten years, with the entry into labor market of professionals graduated by the second undergraduate course of the state. Since then, a greater number of professionals have been graduated. However, it is understandable that these professionals have not reached higher income ranges yet. Comparing with physician professional life phases²⁵, Paraná occupational therapists are in the beginning of their professional life, establishing partnerships in the labor market.

The main difficulties mentioned are related to remuneration, lack of identity, lack of professional recognition, and lack of improvement in the profession, professions characteristics still in development process.

FINAL CONSIDERATIONS

The research allowed drawing a general profile of Paraná occupational therapist based on a representative sample.

The significant growth in the number of professionals in the state since 2005 coincides with the first Occupational Therapy class graduation in a public institution.

The number of professionals expansion who completed postgraduate courses both *lato* and *stricto sensu*, demonstrated a public authority concern with the category providing permanent and continuing education, and multi-professional residency offers.

It was observed that most professionals work in traditional areas such as Mental Health and Functional Health. However, it was observed a movement to change this pattern with the number of professionals increasing working in Hospital and Social Contexts.

This professional performance in primary care is still incipient, contrary to the possibilities offered by public policies.

The research showed that most of professionals work in municipal public institutions, demonstrating the insertion of occupational therapists in SUS.

Results related to monthly income showed that the longer the education time and the age group range, the higher the monthly income. Accordingly, the fact that Paraná occupational therapists have not reached high-income ranges can be related to the fact that most professionals are young, and the profession is still in maturing and consolidation process.

The study requires a deep research in education and labor market trends, but already present indications that can

lead to some aspects, for example, creation of *lato sensu* postgraduate courses specific to occupational therapists, in areas with greater concentration of professionals. In addition to social control actions development that may demand effective actions from public authority in compliance with public policies that recommend the occupational therapist presence in Primary Care actions in Health.

Professional profile exploring possibilities were not exhausted with this study, and new researches shall be developed in order to explore other profile characteristics.

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