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AFRICAN-AMERICAN WOMEN IN A PREDOMINANTLY CAUCASIAN FEMALE PROFESSION: LEARNING PATHS TO POSITIONS OF PROMINENCE

A Thesis in

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by

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Abstract

The purpose of this study was to understand the learning paths of a purposive sample of African American women who held positions of prominence within a predominantly female Caucasian allied health profession. Specifically, it sought to understand the processes by which these women learned and developed throughout their life span; the personal, family, and societal expectations and support systems they experienced as well the opportunities and barriers they encountered during their life span; and the strategies they employed to succeed in their educational and career paths. It used a phenomenologically based, oral history research methodology to interview twenty two African American female leaders within the field of occupational therapy. The study found that the women followed lifelong learning paths within interconnected family, educational, network, personal, and societal systems. Learning opportunities within these systems enabled the women to develop those qualities and skills necessary to fulfill leadership roles. Messages from family members and supportive individuals within the other systems perpetuated a belief in the capacity of as well as an expectation for the women to succeed. In contrast, the women also heard negating messages that stemmed from racism, and to a lesser extent, sexism. In spite of such messages and the differential positionality they caused, the women understood that they were to assume leadership roles that attended to the needs of others. Leadership was not for personal gains but for social advocacy. Rather than assume leadership responsibilities in only one area, the women assumed concurrent responsibilities in educational, health care, community, church, and government arenas. Because of the transformational leadership qualities they displayed, they advanced to positions of prominence within and outside the field of occupational therapy at the state, national, and international levels.

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Chapter 1

This chapter provides an overview of a study that sought to understand the learning paths of African-American women who held positions of prominence within a predominantly female, Caucasian profession. The chapter includes an introduction, a background to the problem, a purpose statement, the theoretical framework undergirding the study, an overview of the research methodology and data analysis procedures, an identification of the significance of the study, and a delineation of the assumptions and limitations associated with the study.

INTRODUCTION

This study utilized a phenomenologically based, oral history research methodology to understand the learning paths of African-American women who held positions of prominence in a predominantly female, Caucasian profession. Specifically, the study explored the processes by which these women learned and developed throughout their life span; the personal, family, and societal expectations and support systems they experienced as well the opportunities and barriers they encountered during their life span; and, the strategies they employed to succeed in their educational and career paths.

Background

Research about adult learning, development, and leadership fails to provide a comprehensive examination of the processes by which African-American women who hold positions of prominence within professional organizations acquire the knowledge and skills to assume these positions (Parker & ogilvie, 1996). Many of the fundamental assumptions about adult development and learning stemmed from Erikson's stage theory of development (1950) and Knowles' theory of andragogy (1977). Critics of Erikson's and similar stage theories of development, however, argued that their assumptions about the orderliness, predictability, and fluidity of movement are based primarily on a-priori theorizing and upon small, non-representative samples, usually, young to middle age, heterosexual, middle class, Caucasian men (Peck, 1986). Critics of Knowles' work postulated that its emphasis on self-directedness and individual development did not reflect the importance of connections and relationships in learning valued by groups such as women (Gilligan, 1993) and African Americans (Flannery, 1994). Critics of both Erikson and Knowles challenged the universality and generalizability of such works to women learners (Caffarella & Olson, 1993; Flannery, 1994; Peck, 1986).

Theories of female adult learning and development that addressed such criticism incorporated the interaction of the person with the human and physical environments and made possible the construction of a reality based on the person's interpretation of events (Galligan, 1993; Peck, 1986; Sherif, 1982; Unger, 1983). Topics of exploration included the extent to which social class, gender, and historical context, rather than adult life

stages, correlated with adult development and roles (Merriam, 1984). The recurring questions in all of the feminist approaches included how is knowledge constructed; how does one find voice; who has authority; and, how does one deal with differences based on gender, race, ethnicity, class, physical and mental ability, and sexual orientation (Belenky, Clinchy, Goldberger, & Tarule, 1996; Gilligan, 1993; Tisdell, 1995). Similar to the research about male learning and development, however, much of the original, published research about women's learning and development focused on middle class, Caucasian, heterosexual, young to middle age females (Collins, 1991; Johnson-Bailey & Cervero, 1996; Tisdell, 1995).

Much of the original feminist research, labeled psychoanalytic and liberal feminism, was individually focused and examined development from a psychological perspective (Tisdell, 1995). The psychoanalytic approach looked at the conscious and unconscious roots of patriarchy. Liberal feminism helped women learn how to access systems of privilege predominantly reserved for men. These approaches did not systematically critique society and were criticized for being too rooted in one place in history and too focused inclusively on the needs of White, middle class women (Tisdell, 1995). In response, structural feminist perspectives, which include radical, Marxist, social, multicultural, and Black feminism, began to emerge. Such approaches emphasized issues of social change and marginalization. Currently, post structural/post modern feminist approaches, which include social, Black, and multicultural feminism, examine the issues of power and positionality within a structure as well as the capacity of individuals or groups to act as advocates of change in spite of the oppression (Tisdell, 1995). Structural

and post structural feminist research about African-American female development is investigating such issues as the socialization processes, dual gender and racial discrimination experiences, and educational expectations. For example, it is exploring how the intersection of race and gender results in relegating African American women to the roles of the field mule and the house domestic, constricting their access to formal education, and blaming them for the societal ills confronting the African American community (Collins, 1991). As well, it is examining those rearing practices by African American mothers which seek to develop daughters who are autonomous, self-assured, and nurturing, able to become bicultural, and resist oppression by the dominant culture (Collins, 1991; hooks, 1984; Parker & ogilvie, 1996).

Similar to the research about learning and development, fundamental assumptions about leadership stemmed from studies of White men and emphasized the hierarchical control and competitive nature of leadership. Those initial studies of women in leadership positions emphasized the need for women to adopt these male leadership characteristics (Christ, 1993; Parker & ogilvie, 1996). Current research on female leadership is seeking to identify specifically female styles of leadership, characterized by teamwork, empathy, intuition, and collaboration (Parker & ogilvie, 1996). Parker and ogilvie (1996) suggest that what is emerging in the literature are two culturally distinct models of leadership that are gender based and reflect the socialized traits, behaviors, and styles of men versus women without regard to dual complexity of gender-racial issues. Research regarding leadership of women of color remains on the periphery (Burgess & Horton, 1993; Collins, 1991; Dugger, 1991; hooks, 1994; King, 1988).

The little research that does exist suggests that African American women in positions of leadership effectively blend together masculine and feminine leadership styles and use divergent, creative thinking patterns, risk taking skills, and networking approaches to bridge multiple social, environmental, and cultural contexts (Bell, 1990). Yet, in spite of these capacities, African American women continue to confront dual oppression of race and gender. They remain on the most disadvantaged rung of American society in terms of economic and social status and suffer negative consequences regarding stereotypical images of Black women and nonconformity to feminine gender stereotypes. Though women now hold 40 percent of the managerial positions, African American women hold only 3 percent. Of the top executive positions, Caucasian women hold 2 percent; whereas, African American women hold 0.9 percent (Parker & ogilvie, 1996).

Problem Statement

Traditionally, professional careers related to health and education have included more female members than stereotypical male professions such as engineering and science. In such professions as genetic counseling, speech and language therapy, nursing and occupational therapy, females comprise over 90 percent of the membership and most are Caucasian. The nursing profession has one million members. The occupational therapy profession has 70,000 members (AOTA, 1997). The membership in all of these professions continues to expand. Within the last century, these professions have encouraged women to engage in advanced level, lifelong, adult learning pursuits and

encouraged them to earn positions of prominence within national organizations, the military, and governmental agencies. As limited as the research is related to how African American women learn and develop positions of prominence within the dominant White, male culture (Talley-Ross, 1991), however, even more limited is research that examines how African American women learn, develop, and assume positions of prominence within these predominantly female, Caucasian professions (Bolden, 1993). Research about adult learning, development, and leadership fails to provide a historical recording or a comprehensive examination of the processes by which African-American women who hold positions of prominence within these professional organizations, acquire the knowledge and skills to assume these positions. It is questioned to what extent this limited understanding has contributed to the homogenous membership of these professions.

Since demographic studies predict that people of color will comprise 20% of the population of the United States by the year 2005, it may be assumed that the membership and leadership in these professions also will become increasingly diverse. Concurrently, these professions are being urged by current health and funding policies to create professional learning opportunities that enable their members to assume more powerful positions of management and policy leadership within the health care, government, education, and funding arenas. Thus, it becomes imperative for these Caucasian female-dominant, nurturing professions to develop adult, professional education models and practices that are racially and ethnically responsive to the learning and leadership development processes of all of their members.

Purpose of the Research

The purpose of this research was to understand the learning paths of African American women who held positions of prominence within a predominantly Caucasian, female profession. Specifically, the research questions explored: the processes by which these women learned and developed throughout their life span; the personal, family, and societal expectations and support systems they experienced as well the opportunities and barriers they encountered during their life span; and the strategies they employed to succeed in their educational and career paths.

Design of the Study and Methodology

This study used a phenomenologically based, oral history research methodology to interview a purposive sample of African-American women who held positions of prominence within a nationally recognized, professional organization, resulting in a rich, thick description of their lived histories. The American Occupational Therapy Association (AOTA) served as the specific professional organization because of its national recognition within the female dominated field of education and allied health, and because of its 90% White, female membership. A snowball sampling strategy, professional news journals, and the researcher's personal knowledge of professional leaders were used to identify the participants. To verify the findings and ensure trustworthiness, the researcher kept a journal of her observations and impressions. She

employed a constant comparative method to index and categorize emerging themes. She conducted member checks and sought expert consultations by dialoguing with the participants about the emerging patterns and mailing each of them a conference paper discussing the preliminary findings. In addition, the researcher submitted drafts of the dissertation to several of the participants for their feedback.

Theoretical Framework Guiding the Study

Post structural and Black feminist perspectives provided the theoretical framework for reviewing the three central strands of the literature search: occupational therapy history, women's learning, and women's leadership. These perspectives served as the lenses for analyzing the results of the study within the context of the American Occupational Therapy profession (Collins, 1991; hooks, 1991; Sheared, 1992; Tisdell, 1995).

Definition of Terms

The following definitions of terms were used throughout the study:

Positions of prominence included: educational program directorships, national office management positions, state or national organization officer positions, or national award rosters.

Learning included those processes by which the women acquired increased cognitive, spiritual, affective, social, and physical understanding throughout the life span. It included formal, informal, and incidental educational opportunities within the family, community, school, work related, and professional contexts.

Learning paths reflected the building of one learning experience upon previous learning experiences, and the interconnectedness of such learning experiences through time that created patterns for cognitive, spiritual, affective, social, and physical understanding. Learning paths also implied the bounds or terrain in which the women were allowed to or did learn. These paths were not necessarily linear or direct in their routes.

African American women referred to those women, who by self-definition, viewed themselves as African American or Black women.

Caucasian women referred to those women, who by self-definition, viewed themselves as Caucasian, Anglo, or White women.

Predominantly female professions referred to those organizations which held national recognition by government, health, or education organizations; required higher education and credentialing mechanisms to practice; and, whose membership was at least 75% female.

Occupational Therapy referred to that allied health profession which utilized meaningful and purposeful activities to facilitate the ability of individuals and groups to engage/re-engage in their daily living, work related, and leisure occupations, abilities which were compromised or lost because of physical, psychological, social, and environmental losses, disabilities, and challenges.

Significance of the Study

This study was significant for adult education theory and practice for several reasons. In contrast to those studies which examined African American women's learning and leadership from Eurocentric perspectives in a male dominated working environment, this study explored those themes from the perspectives of the African American women who held positions of prominence within a predominantly female, health care profession. By using an oral history methodology, it validated the experiential knowledge of the women and highlighted the multiple dimensions of their learning experiences. In so doing, it created a reservoir of information for contributing to the emerging theories about African American women's learning and leadership, based on the agency of the women rather than their objectification by others.

In the arena of adult education practice, it served as an information resource for mentoring other African-American women in their professional education and career paths. As well, it generated suggestions for designing more inclusionary educational and leadership opportunities that supported the development of African American women.

Assumptions of Study

The following biases and assumptions of the researcher underpinned the purpose and methodology of this study.

1. The processes by which African American women learn and assume positions of prominence in predominantly Caucasian, female professions were unrecorded and largely unknown by those professions.

2. This lack of understanding and omissions contributed to the perceived homogeneity of occupational therapy as a Caucasian, female profession.

3. The understanding of these processes could be discovered within the collective memories of those women who lived the experience.

4. The stories were context specific and not generalizable to all members of the profession or to other predominantly female Caucasian professions.

5. Post structural and Black feminist perspectives provided helpful lenses for understanding the phenomenon.

6. This knowledge was important for understanding how to create culturally sensitive educational opportunities that support learning, career access, and advancement for women of color in such professions.

Limitations of the Study

There were several limitation associated with this study. These included issues related to: the memory and interpretation of women about their lived experiences, the representativeness of the lives of these women to other African American women within the occupational therapy profession, and the public rather than the private voice of the women because of the proposed access to the audio tapes by the members of the profession through the AOTA archives at the conclusion of the research.

In response to the first two areas of concern and as articulated by Yow (1994), levels of understanding deeper than consciousness were revealed in spite of lapses of memory for specific details, providing meaning to the experience. The stories shared by the women, though context specific, generated a source for dialogue about and analysis of the profession.

As a counter to the third area of concern, women who participated in the study stated that the importance of the study to the profession superseded personal concerns regarding issues of privacy and public voice. It gave them "voice" to issues of personal and professional importance.

In addition to these areas of concern, the racial and cultural background of the researcher, which differed in some ways from these women, limited her full understanding of the lived experiences. To address this concern, the researcher dialogued about the issue with each of the participants during the interview process. They unanimously expressed that they shared much more information during the interviews

than they had originally intended. They proposed that the interview process allowed them to bring recollections and interpretations of their lives to their consciousness. They postulated that the racial difference of the researcher provided credence to the study because it would not be viewed as self or racially serving. In support of the study, the women served as the major source for gaining access to additional, potential participants by sharing the names of and dialoguing with other African American leaders in the profession.

Organization of the Study

Chapter 2 of the study provides a summary and analysis of literature related to the history of occupational therapy, and African American women's learning and professional leadership from a post structural and Black feminist perspective. Chapter 3 of the study furnishes a detailed explanation of and rationale for the methodology used to conduct the study. Chapter 4 presents summary of the findings, supported by thick rich descriptions of the participants. Chapter 5, the final chapter, offers an analysis of the findings and recommendations for future research. The appendixes following Chapter 5 include copies of the interview questions; the consent form; charts of the demographics, leadership positions and educational levels of the women; and summaries of the education and work opportunities of family members.

Chapter 2

LITERATURE REVIEW

Introduction

This literature review focused on three core themes relevant to the study: the history of occupational therapy, women's learning, and women's leadership. Rather than provide a detailed description of occupational therapy, this first section of the literature review considered the formative culture, the membership composition, topics central to continued development of the profession, and contributions of African American women to occupational therapy. The second section of the literature review discussed the research about women's learning with an emphasis on African American women's learning. The third section of literature review examined women's leadership, with particular consideration of African American women's leadership. Post structural and Black feminist perspectives served as the lenses for the interpretation of each of these themes.

Though this current study specifically addressed the topic of positions of prominence rather than women's leadership, this literature review focused on the latter. A search of the ERIC data base indicated that the concept of position of prominence was encompassed within rather than addressed separately from leadership in the literature.

Initially, each of these themes was reviewed independently within the literature review. Then they were critiqued in relationship to one another. Collectively, the themes created a backdrop for understanding the learning paths that led to positions of

prominence for African American women within the predominantly Caucasian female, health care profession of occupational therapy. The analysis of the literature highlighted the limitations of existing research, providing justification for this study and its research methodology.

Overview of the History of the Occupational Therapy Profession

This section highlights the formative culture, the original membership composition, and issues central to the continued development of the occupational therapy profession. It concludes with a summary of the recorded contributions of African American women to the profession.

Formative Culture

The occupational therapy profession was officially founded in 1917, a time in United States history marked by early feminist movements (Frank, 1992; Quiroga, 1995) and progressive education ideologies (Elias & Merriam, 1995). It followed the first wave of feminists, comprised primarily of women from White, middle class backgrounds who received an education and sought fuller emancipation during a meeting at the Conference on the Rights of Women in Seneca Falls, New York, in 1848. It emerged in the wake of the efforts of a few, wealthy, White women, encouraged by the women's rights movement, who dared to attempt to enter but were excluded from medical schools, and

the efforts of a group of upper class White women, receiving financial support from their families, who sought to improve the conditions of the sick by establishing three training schools for female nurses in 1873 (Hamlin, 1992; Frank, 1992). It developed at a time in the early 20th century, when progressive era feminists such as Mother Jones, Julia Lathrop, Lillian Wald, Crystal Eastman, and Jane Addams, raised their voices and engaged in social activism for the rights of children, women, laborers, coal miners, immigrants and those with mental illnesses (Frank, 1992).

Concurrently, during this same early 20th century time frame, American medicine had established itself as was one of the most White, male dominated health systems in the industrialized world and was developing specialty areas to address not only acute but chronic disease processes such as psychiatric disorders, tuberculosis, heart disease, and disabling physical conditions (Quiroga, 1995). Within this system it was believed that the inherent rational skills of men made them capable of assuming curing but not caring responsibilities. Conversely, it was believed that the presumed caring nature of women made them inherently capable of fulfilling caretaking roles but not the perceived higher level curing roles (Hamlin, 1992). Such beliefs, in tandem with early feminist and progressive education ideologies, contributed to the cultural arena for the formation, the mission, the membership composition, and future development of the occupational therapy profession (Quiroga, 1995).

The formation of the profession is credited to several upper middle class, White men and women who utilized a combination of structured work, leisure, art, craft, and exercise activities, collectively labeled occupations, in their treatment of individuals convalescing

from chronic psychiatric disorders and physically disabling conditions during the twenty years preceding the official founding of the National Society for the Promotion of Occupational Therapy. They formed the Society, whose name was changed to the American Occupational Therapy Association in 1923, to study the effect of occupations on the well being of human beings, to advance the use of occupations as a therapeutic modality, and to generate scientific knowledge about the specific benefits of occupational therapy on the habilitation/rehabilitation of individuals with chronic mental illness and physical disabilities. Their work was inspired by the Arts and Crafts movement, the ethics of the Moral Treatment approach, and recognized benefits of the curative workshop (Christensen, 1991; Hopkins & Smith, 1983; Punwar, 1994; Quiroga, 1995).

The Arts and Crafts Movement at the turn of the century was in response to the dehumanization of workers and the mechanization of skills associated with industrialization. The Arts and Crafts movement, through the use of traditional activities such as needlework, woodwork, metalwork, and basketry, sought to highlight the worth of the individual, the quality of his or her work, and the direct hands-on control of the person over the products he or she produced. Moral treatment emphasized humane and restraint free treatment of individuals with psychiatric disorders, and espoused that all individuals were capable of self-control, regardless of the severity of their mental illness. It was in direct response to the abusive, warehousing treatment of immigrants during the late 1800s, especially those with mental illnesses and to juveniles in correctional institutions. The value of curative workshops to help individuals convalescing from physical injuries and mental illness to develop skills necessary for gainful employment,

stemmed from observations that the indigent patients in almshouses and sanitariums got better more quickly than those who had financial resources to participate in the rest cure, which included complete bed rest and a bland diet, during their recuperative period. (Quiroga, 1995). The difference was that those who were poor actively engaged in a structured regimen of exercise, rest, music, drama, and art activities and worked in the laundry, food preparation, and carpentry departments of the asylums while those with money remained idle (Christensen, 1991). This shift away from rest toward advocating of engagement in purposeful occupations to facilitate the healing process reflected the influences of progressive philosophies in medical thinking during the early 20th century (Quiroga, 1995).

The literature credits Adolph Meyer as the forerunner and George Barton, William Dunton, and Thomas Kidner as the three male founders of the occupational therapy association. Barton served as its first president. Dunton served as its second president and the editor of the first three occupational therapy journals, Archives of Occupational Therapy in 1922, the Occupational Therapy and Rehabilitation in 1925, and the American Journal of Occupational Therapy in 1947. Kidner is credited with founding the Canadian Occupational Therapy Association (Christensen, 1991; Hopkins & Smith, 1983; Punwar, 1994; Quiroga, 1995). Meyer and Dunton were psychiatrists; Barton and Kidner were architects. Letters between Barton and Dunton emphasized their concern about the acceptance of the female profession of occupational therapy within the male dominated, medical community. They focused on creating a strong organizational base, developing a theoretical framework which emphasized the science of the profession, and determining a

title that would reflect the therapeutic nature of the profession based on active engagement in occupations (Christensen, 1991; Quiroga, 1995).

Susan Tracy, Susan Johnson, and Eleanor Clarke Slagle are credited as the three female founders of occupational therapy. Collectively, they developed a theory utilizing goal directed occupations to improve health (Hamlin, 1992) Tracy was a nurse; Johnson, a teacher; and Slagle, a social worker. Because they came from White, middle to upper middle class backgrounds and were members of professions deemed appropriate for women at the beginning of the 20th century, they were perceived as females capable of making valuable contributions to the formation of the organization (Frank, 1992).

In 1906, 11 years prior the official formation of the occupational therapy profession, Tracy had organized the first systematic training course in occupations to prepare nurses to select and utilize craft activities that were appropriate to the patient's physical and mental capacities, and that promoted recovery and re-entry to one's social life. In 1910, she wrote the first training text on occupations, Studies in invalid occupations, a manual for nurse and attendants (Hopkins & Smith, 1983). In 1916, under the auspices of the Department of Public Charities, Johnson directed programs in occupations for patients in New York City municipal hospitals, attempting to prove the beneficial relationship between craft work, rehabilitation, and financial independence. One year previous to that, Slagle organized the first professional school of occupational therapy, the Henry B. Favell School of Occupations in Chicago, where she served as the director from 1910 to 1922. She became the first vice president of the occupational therapy profession and focused

her efforts on developing academic programs and assisting individual practitioners to create occupational therapy departments within hospitals (Christensen, 1991).

Original Membership Composition

Slagle's own family background as a cousin of Theodore Roosevelt, her middle to upper middle class social networks of White women's clubs and church organizations, and her belief in the qualifications needed for individuals to become occupational therapists contributed to the kind of women she recruited into the profession. They were White women primarily from select backgrounds who were committed to social needs and causes within the community and whose families possessed the financial resources to afford both finishing and occupational therapy school (Quiroga, 1995). Slagle wrote:

> For the work with mental patients one would naturally select the older woman. Do not, however, understand that there is not a place for the younger woman - there is- but the responsibility of training them to understand behaviors in terms of symptoms is one that all directors and teachers are not prepared to assume.... We sense the proper balance of qualities, proper physical expression, kindly voice, gentleness, patience, ability and seeming vision, adaptability that will make it possible under most circumstances to meet the particular needs of the patient in all things, or in other words, to play the part and the ability to live, as it were, for a little at least, in the world of the patient.... Personality plus character also covers

> an ability to be honest and firm, with infinite kindness, infinite patience and infinite gentleness. (Frank, 1992, p. 992)

Prominent male physicians, educators, and clergy connected to society circles served on the advisory boards for the occupational therapy schools in Boston, St. Louis, and Philadelphia. Women associated with these men exercised important links in the formation of the occupational therapy labor force. The women who entered occupational therapy perceived it as a profession rather than a job, reflecting their White, middle to upper middle class beliefs about the role of educated women in the work force (Frank, 1992). That the women came from such a homogeneous racial and socioeconomic class may have contributed to the minimized subordinate role they assumed, within the White, male dominated medical profession, relative to that of nurses who came from more diverse backgrounds (Frank, 1992). It is important to note that women of color were excluded from the profession of occupational therapy within the larger context of American societal discrimination. As Florence Cromwell noted in 1992, "'given the early pre -OT schooling, teacher academies, nurse training... there were only White 'ladies' there'" (Frank, 1992, p. 994). Men were excluded because it was deemed that the profession's emphasis on nurturing skills and the therapeutic use of self were most suited to the role of women. A critique, from a feminist perspective, of the original occupational therapy founders and practitioners suggested that the men assumed organizational, administrative roles and engaged in the publication of academic discourse; the women assumed nurturing roles for educating others, for implementing the organizational and academic discourse, and for providing direct services (Quiroga, 1995).

The demand for occupational therapists expanded in 1918 as the United States entered World War I. At the persuasion of Dunton and Slagle, the commander of the Allied Expeditionary Force, General John Pershing, requested 200 occupational therapists, classified as reconstruction aides within the Medical Department of the Army, to serve the wounded soldiers (Christensen, 1991). The Surgeon General recruited only single women who were White, 25 years of age or older, had at least a high school diploma, had experience in a profession such as social work or library science, and had a theoretical and working knowledge of crafts. It was argued that women, rather than men, would best provide morale and motivation for the wounded soldiers with the least amount of discipline disruption. Intensive 6 to 12 week courses were given in anatomy, kinesiology, psychology for the handicapped, ethics, hospital administration, fatigue, work cure, and the application of crafts. Fieldwork training in a hospital setting was a vital component. Considered civilian employees, they worked with soldiers on orthopedics, surgical, and mental health wards. By the end of World War I, 25 of these emergency war occupational therapy schools had graduated 1685 reconstruction aides, one-fourth who had served overseas (Hopkins & Smith, 1983).

Issues Central to the Continued Development of Occupational Therapy

During the next seventy years, the occupational therapy profession continued to develop and define itself in relation to emerging health care, political, and societal context in the United States. The following section outlines this development.

Post World War I to Pre World War II

Many of the original reconstruction aides who had joined occupational therapy, as an act of patriotism, left after the war to assume traditional female societal roles of marriage and parenting. Thus Slagle, Tracy, and other early female occupational therapy leaders needed to use their connections with women's volunteer societies to recruit and educate new female therapists from middle and upper middle class White families to sustain the growth of the profession. They also used their influence with medical leaders to move the profession closer to the medical world and raise it to a level of health profession separate from a philanthropic, diversionary, or entertainment image. Concurrently, they resisted dominance by the male medical society, sustained the profession's social and financial ties to women's networks, retained control over its academic programs, and maintained professional autonomy. They closed several of the original occupational therapy training programs that had formed in response to the war emergency because of low academic standards. They raised the standards for all academic programs to include a minimum of 12 months of post high school education in anatomy, kinesiology, medical conditions, and therapeutic occupations. In addition to the schools that continued to exist in Boston, Philadelphia, and St. Louis, they opened additional schools in Wisconsin, Minnesota, Michigan, and Canada. Except for the school in St. Louis, all of the others continued to accept only White, female applicants. Efforts to discover the reason for the shift by St. Louis to expand its admissions policy to also accept White males have not yet been successful (Quiroga, 1995).

Job opportunities for occupational therapists expanded in civilian and military hospitals as mental health and tuberculosis programs transitioned from acute care to wellness, prevention, and long term therapeutic care models. As well, as the result of the 1923 Industrial Rehabilitation Act, employment opportunities were created for occupational therapists in general hospitals dealing with industrial accidents and vocational rehabilitation. As in the early formative years, however, the male leaders associated with the profession continued to focus on theory and organizational development, strengthening associations with the medical society, publication of journals, and holding national office presidency positions (Quiroga, 1995). An analysis of these gendered divisions of labor suggested replication of the male-female cure-care dichotomy prevalent within the larger health care system of the United States. It is of interest that none of the cited literature that dealt with the history of the occupational therapy profession referred to the male founders as occupational therapists, yet referred to the female founders as such.

World War II

Though occupational therapy strengthened its professional image within and connections to the American Medical Association between 1917 and 1940, it retained its World War I subprofessional classification within the Civil Service until World War II. It then shifted to a professional classification and became one of the required therapies for the treatment of wounded servicemen. Because of the initial lack of understanding within the military hierarchy regarding capacities and function of occupational therapy, the

American Occupational Therapy Association acquired an unprecedented responsibility for advocating and determining occupational therapy roles within the military sector. It established communications with First Lady Eleanor Roosevelt, the Surgeon General of the Army and Navy, the Veterans Administration, and the Red Cross. It published articles about occupational therapy in the Military Surgeon, identified basic lists of occupational therapy equipment to be utilized by the military, and received formal journal recognition by physicians commending its services in the rehabilitation of service personnel (Quiroga, 1995). Membership expanded to 2265 and included 50 men (Hopkins & Smith, 1983).

Despite these gains, occupational therapists initially were denied military status within the Medical Department. Feminist perspective suggests that this was related to the predominance of females in and the perceived caring health care roles of the profession. This denial of military status resulted in less pay and fewer privileges than appointments of comparable rank within the Women's Army Corp (Frank, 1992).

Concurrently, official military policies of racial segregation as well as those in civilian society contributed to the absence of people of color within occupational therapy. No records exist which identify any African American woman in occupational therapy up to this time. In contrast, World War II created an arena for the entry of African American women into White nursing associations. As White occupational therapists were fighting for equality as women in the military, Black nurses struggled to be accepted as qualified professionals within the military (Frank, 1992). Though the Congress of Industrial Organization was founded and established the Federal Employment Practices Commission in 1941 to decrease discriminatory hiring practices in defense related

industries (Scott, 1991), it was not until the end of the war that the Army began to accept a quota of Black nurses from civilian populations. After an unrelenting campaign by the National Association of Colored Graduate Nurses, the severe shortage of personnel, and the resistance of the Army to initiate an unpopular draft of White nurses did the Army drop the quota system. Only after the victory of the National Association of Colored Graduate Nurses in the military, did the American Nurses Association permit membership to Black nurses. Black nurses and physicians were prohibited from practicing in most hospitals except those which exclusively served Black populations (Frank, 1992).

In 1947, the Army-Navy Nurses Act established the Women's Medical Specialist Corps providing regular military status for nurses, occupational therapists and other predominantly female allied health professions. The formation of this corps, while formally including females into the military, simultaneously segregated them within it. Ruth Robinson, an occupational therapist, was the first Army Medical Specialist officer to receive the rank of colonel. She, along with Wilma West and Mary Reilly, who received commission status, eventually served as presidents of the American Occupational Therapy Association and professors within occupational therapy programs (Frank, 1992).

In spite of the professional and membership advancements made by occupational therapy from its conception to the years immediately following World War II, it remained homogeneous in its gender and racial composition. Ninety seven and one half percent of the occupational therapists were female (Hopkins & Smith, 1983). Of these, only two

were African American, Naomi Wright and Ruth Coleman Denard (Wells, 1993). Though the American Occupational Therapy Association membership directory indicated that these two women became occupational therapists in 1946, there is no record as to how they entered the profession, where they received their occupational therapy education, where they began to practice, their contributions to the profession, nor issues of race that they confronted as they advanced through their careers. It should be noted that there was only one source that referenced the entrance of these women into occupational therapy and that this source was outside the dominant texts of occupational therapy. There is not a written discussion as to how these two women may have opened the doors for the admittance of other African American women into occupational therapy nor changes that occurred within the recruitment and admission policies of the occupational therapy association that supported the opening of the doors. Neither is there a recorded discussion about the relationship of the entrance of these two women into occupational therapy on the footsteps of the acceptance of the National Association of Colored Graduate Nurses into the American Nurses Association. Based on the chronological age of a few African American female occupational therapists, and the traditional tendency of students to enter occupational therapy education programs in their late teens or early twenties, it is assumed that more African American women followed Wright and Denard into occupational therapy during the 1950s and 1960s. As with Wright and Denard, however, the history of this process remains unrecorded.

1950s and 1960s

During the 1950s and 1960s, the profession established a national certification examination and expanded educational standards to require a baccalaureate degree. It also developed its first master's level program at the University of Southern California. Fieldwork remained a critical component of the educational process and fostered direct mentorship by experienced clinicians of occupational therapy students. To deal with the increasing demand for occupational therapy personnel, more baccalaureate programs opened and opportunities to develop two year, technical level programs were explored. The World Federation of Occupational Therapists was created with the American Occupational Therapy Association as one of its ten founding members. Its goal was to share information regarding new techniques, establish international minimal standards of education and practice, promote the international exchange of therapists, and facilitate the promotion of health services in developing countries (Hopkins & Smith, 1983). Consistent with its progressive roots, the AOTA received multiple grants to conduct special projects and expand the level of services and life long educational opportunities for its members. It offered workshops and provided manuals for the development of academic and clinical education, personnel policies and protection for its members, and organization and departmental procedures and guides (Christensen, 1991).

Coming under increased pressure from the medical association to adhere to medicine's increasing scientific and technical methodologies, the profession launched research into and increased publication about neurodevelopmental principles, biomechanical techniques, rehabilitation strategies, orthotic and prosthetic training, and

the social adaptation processes of clients to return to their families and communities. Specialization emerged as practitioners identified themselves with particular areas of practice (Punwar, 1994).

1970s and 1980s

By the 1970s, leaders in the field, such as Mary Reilly, challenged occupational therapists to re-center practice on the life roles of the clients, their needs, and their capacities to adapt to their daily living, work and leisure occupations. Leaders, like Wilma West, formed alliances with government agencies such as Maternal and Child Health to promote community activism and focus the profession's practices to sustain and promote health rather than solely remediate disability. In 1979, the profession restated its philosophy of practice and its belief in human potential and the therapeutic value of active engagement in purposeful activities (Christensen, 1991).

In the 1980s, expanded theories of occupational therapy defined the adaptive process of humans in their daily living, work and leisure occupations, as effected by their social, cultural, and physical environments, and refocused the profession to consider both the technical expertise as well as the nurturing, of the client-centered aspects of practice. Therapists were encouraged to listen to the personal as well as the medical stories of their clients and intertwine procedural, interactional, and conditional reasoning to direct their clinical judgements. That is, they were encouraged to concurrently consider the occupational therapy methodologies, the therapist-client-family relationships, and the client as an individual within the context of his or her medical, educational, social, cultural, and economic conditions when determining the occupational therapy process.

The profession supported efforts of therapists to expand their areas of practice beyond the bounds of traditional medical structures to also collaborate with home health agencies, school and early intervention systems, hospice and homeless programs, aging and community mental health organizations, disability advocacy groups, bio-technology developers, and health-wellness funding and policy committees. The American Occupational Therapy Foundation was created to support research (Hamlin, 1992).

The 1990s

Critical issues for the 1990s centered on health care practices and reimbursement shifts, expanded functional outcomes research, accountability, broadened medical-educational-wellness continua, and professional and governmental networks. The profession created national level offices to address issues of ethics, diversity, and multiculturalism. Though membership of the profession expanded to 70,000, it remained primarily White and female. Of those who were occupational therapists, 93.9 percent were females and 6.1 percent were males, 2.6 percent were African American, 4.1 percent were Asian or Pacific Islander, 90.5 percent were White, 0.9 percent were other, and 0.2 percent were unknown. Of those who were occupational therapy assistants, 91.6 percent were female, 8.4 percent were male, 5.4 percent were African American, 1.3 percent were Asian or Pacific Islander, 89.9 percent were White, 0.6 percent were other, and 0.5 percent were unknown. Records did not reveal the geographic location where these various subgroups tended to practice nor the number of occupational therapists or occupational therapy assistants who identified themselves as both female and African American (AOTA, 1997).

An interesting corollary was the position of males in the profession. Though they comprised only 6.1 percent of the membership, they held 8 percent of the master and 16 percent of the doctoral degrees. Twenty one percent of the males held administrative positions compared to 12 percent of the females. Nineteen percent of the males earned over $50,000 compared to six percent of the females (Miller, 1992). Currently unknown is the number of African American women, compared to men or women in general, who hold advanced degrees and administrative positions.

A review of the literature and several national data bases was conducted to determine if any relationship existed between the number of African Americans receiving occupational therapy services and the number of African American women entering occupational therapy. Specifically, only two articles could be found that addressed differential access for African Americans to occupational and physical therapy rehabilitation services. Hoenig, Rubenstein, & Kahn (1996) found that the intensity of rather than access to rehabilitation differed for African Americans versus non-African Americans after a hip fracture. African Americans were more likely to receive low intensity instead of high intensity occupational and physical therapy services. In contrast, Horner, Sloane, Hoenig, Kahn, and Rubenstein (1995) found that among Medicare eligible clients, African Americans received the same amount of physical and occupational therapy services as did Caucasian clients after a cerebral vascular accident. Searches conducted through the Disability Statistics Rehabilitation Research and Training Center, the National Rehabilitation Information Center, the National Rehabilitation Research Center, National Center for Health Statistics, National Vital Health Statistics

System, and the American Occupational Therapy Research Department did not produce any additional information which addressed the number of African Americans receiving occupational therapy or any other kind of related rehabilitation services.

Contributions of African American Women to Occupational Therapy Between 1946 and the Present

Though African American women made significant theoretical, educational, and organizational contributions to occupational therapy since Wright and Denard first entered the profession in 1946, their histories and contributions remain primarily oral rather than recorded. The works of Lela Llorens, who is the only African American to be honored with the prestigious Slagle Lectureship Award, remain a notable exception (Llorens, 1969, Wells, 1993). As well, when and how occupational therapy programs opened in the three historically Black universities of Howard, Tuskegee, and Florida A and M has not been recorded in the primary historical texts of the profession (Wells, 1993). Though it is known that the Black Occupational Therapy Caucus (BOTC) formed in l974 to help increase awareness of and access to occupational therapy services within the African American community, recruit and support students entering the profession, and orient practitioners to inclusion models of treatment sensitive to the diverse ethnic and cultural backgrounds, such knowledge also remains outside the context of traditional occupational therapy texts. How, where, and by whom the BOTC was formed, how it sustained itself, addressed issues of racism, and struggled to fulfill its mission also remain

outside the dominant occupational therapy written or spoken discourse. Only one, brief, non-juried article identifies the nine African American women who have been elected to the American Occupational Therapy Roster of Fellows, with Llorens being the first in 1973 (Wells, 1993).

Such a dearth of recorded history of the contributions of African American women to occupational therapy forces the profession to examine why this has occurred, how this has contributed to the limited number of African American women within the profession, and why so few hold positions of prominence. It challenges the profession to revisit and rediscover its history from a more culturally expansive perspective. It begs systematic inquiry into learning paths of those African American women who entered, remained involved, and achieved positions of prominence within occupational therapy. By accepting the task and by doing so from a post structural, Black feminist perspective, the profession places itself in a position to consider issues of privilege and oppression within its own institution and the larger societal context that have facilitated or hindered acceptance into and learning paths through occupational therapy for African American women. It allows the profession to reflect on those processes which have supported or blocked access to leadership positions for these women. Knowledge gleaned from the literature on learning and leadership for women, especially for African American women, can serve as a guide for interpreting the results of such an investigation and for directing the creation of mentoring programs that promote learning and leadership tracks for African American female occupational therapists.

Women's Learning Paths

This section of the literature review analyzes studies related to women's learning with specific emphasis on African American women's learning. It highlights limitations within this area of research. It concludes with a discussion of the importance of expanding such research to understand the learning paths by which African American women enter into, negotiate through, and achieve positions of prominence within the predominantly female Caucasian profession of occupational therapy.

Background

Prominent within adult learning theories are assumptions based on White, middle class, male development models that emphasize linear thinking, individualism, and autonomy (Peck, 1986). For example, central to adult learning theories of andragogy and self-directed learning are the beliefs that adult education should foster personal growth through self-directed activities in which the adult learner assumes responsibility for his or her own learning. Such beliefs assume that all adults value individual freedom and seek personal growth in the learning process without consideration of their responsibility to or relationships within the larger community; that learning is an individual rather than a collective process regardless of whether it occurs in a solitary or group format; and that access to or learning within adult education programs is neutral of gender and racial factors as well as the historical, political, social, and economic contexts associated with

them (Flannery, 1994). Research conducted about learning for women in general, and African American women, especially, challenges the universality of these assumptions and proposes alternative purposes, processes, and contexts for learning (Collins, 199l; Flannery, 1994; Hayes & Colin, 1994; Johnson-Bailey & Cervero, 1996).

Research about Women's Learning

Hayes and Flannery (1995, 1996) conducted an in-depth analysis of the studies between 1982 and 1995 that focused exclusively on women's learning within formal and informal educational settings to understand the processes, outcomes, and functions of learning for women. They identified 20 articles that focused on women's learning outside institutions of higher education and 34 that focused on women's learning within higher education. Core themes that Hayes and Flannery discovered within the narratives shared by the women who engaged in learning outside institutions of higher education were the influence of previous experiences and their relation to self identity; sense of self-esteem and worthiness in relation to learning; the role of context and the impact of others on learning; and, the intersection of class, culture, and gender within the learning process. Emerging from these core themes was the significance of culturally imposed, gender restrictions to the dreams about, mentoring for, access to, and roles within learning opportunities.

Three primary themes in those studies that addressed women's learning in higher education environments included: "women's self doubts, women as silenced, and women

as connected learners" (Hayes & Flannery, 1995, p. 34). Other studies about women's learning supported similar themes (Johnson-Bailey & Cervero, 1996; Maher & Thompson-Tetreault, 1994; Tarule, 1988). Self-doubt within the learning environment was related to cultural devaluation of women's abilities and to conflicts between ways in which women acquired knowledge versus its method of dissemination within higher education. Silencing occurred in response to male domination of classroom discussions (Hardy, 1994; Kelly, 1991; Maher & Thompson-Tetreault, 1994). Connectedness emphasized the preference of women to synthesize new concepts with personal and affective experiences, to engage in communal versus solitary learning opportunities, and to integrate their experiences and reflections with those of others in the learning environment (Loughlin & Mott, 1992).

In contrast to the results of these studies, Hayes and Flannery (1995) found others which suggested that women students expressed high degrees of self-esteem (Roundtree & Lambert, 1994), and were more vocal in class than men (Hayes, 1992). Their preference for connected learning was more a reflection of themselves as adult learners and their self doubts with succeeding in traditionally impersonal, competitive learning environments than an intrinsic, female learning style. Such contradictions suggest that more careful analysis needs to be directed to a comparison of the context in which these studies occurred prior to concluding that certain themes clearly reflect the manner in which women learn, or to assume that the learning experiences for African American women is the same as that for White women. In addition, inherent within some of the studies about women's learning continued to be flawed assumptions about women's

learning based on male models of learning and development or those of children and traditional age college students. Missing from this research on women's learning was a dialogue that explicitly reflected the interdependency of women's learning with women's development. As well, missing was a model that demonstrated this relationship as it occurred through time and within the context of racial, political, social, economic, historical, and cultural factors.

Women's Learning Within the Context of Women's Development

Similar to studies that examined women's learning, studies that examined women's development from a feminist perspective questioned the universality of adult development principles based on White, middle class male samples (Caffarella & Olson, 1993; hooks, 1984, 1991; Peck, 1986). Inherent within those male-based models were assumptions about the linearity of development (Erikson, 1982; Havighurst, 1970; Levinson, 1886; Maslow, 1970) and western dichotomies regarding mind/body, reason/emotion, heredity/environment, positivism/subjectivity, and masculinity/femininity (Crawford, 1989). The initial studies about women's development often used the literature on men's development as a basis for comparison. For example, several cross validation studies on women's development, based on the works of Erickson and Levinson, concluded that women experienced developmental paths similar to those of men, though, perhaps to differing degrees and within different time frames (Caffarella & Olson, 1993).

Other studies concluded that women's development was characterized by multiple patterns, role shifts, and a fluid sense of self. Central to these studies was the notion that a woman's development and thus, sense of her own individual competencies, occurred in relation to others (Caffarella & Olson, 1993). For example, the original works of Belenky, Clinchy, Goldberg, & Tarule, (1986) and Gilligan (1982) emphasized the importance of connectedness to the cognitive and moral development processes. Specifically, Gilligan (1982) brought forward the proposition that women's moral decision making processes were grounded within their ethics of caring and connectedness and reflected transitions from selfishness to responsibility, from goodness to truth. She concluded that women transitioned through three stages of moral development in a manner different from that which was originally proposed by Kohlberg (1969). Rather than making moral decisions based on notions of rights, Gilligan (1982) found that women focused on the need to survive without hurting others during the pre-conventional stage of their moral development. During the conventional stage, they made moral choices based on the need of others, self sacrifice, and societal norms. During the post conventional stage, women resolved moral conflicts within a contextual framework of responsibility to self and others.

Gilligan's (1982) work, based on three studies which included a small sample of women confronting the crisis of unwanted pregnancy, a small sample of college men and women thinking about morality in relation to life choices, and matched sets of males and females at nine points across the life cycle considering hypothetical moral dilemmas, served as the conceptual framework for the popularized work of Belenky, et. al. (1986).

Belenky, et. al. categorized five epistemological positions regarding the development of women's perception of themselves as learners: women as silent learners, women as receivers of knowledge, women as producers of subjective knowledge, women as developers of procedural knowledge; and women as creators of constructed knowledge.

Crawford (1989) skillfully argued that these early works of Belenky, et. al. (1986), Gilligan (1982), and other studies about women's development erred from: generalization of findings to all women without attention to issues of ethnicity, class, or age and which positioned women in contrast to men rather than placing women at the center of the discourse. Thus, such studies failed to examine the heterogeneity among women and fueled rather than defused traditional arguments which viewed male-female learning and developmental differences as biological rather than gender based. In her later work, Gilligan (1993) re-centered her beliefs about women's voices and learning within women's daily life patterns. Belenky, et. al (1997) expanded their original studies to the multiple experiences of women from diverse backgrounds.

Peck (1986) proposed a model of development that placed women and their experiences at its core and encouraged a woman's knowledge of herself as an individual-in-society. Though Peck's model was not specifically a model of women's learning, many of her beliefs about women's development provided a foundation for understanding the contextual influences on women's learning. Within the model, she described women's self- definition as an "ongoing process of self awareness and knowledge gained primarily through relationships to other people and to mastery" (p. 282). The model contained three cores stacked inside one another. The outer core reflected the social and historical

environment in which a woman was allowed to learn about herself at a given time. The middle core, labeled the sphere of influence, addressed the bidirectional, affective relationships the woman experienced with family, friends, workers, peers, and groups who played a central role in learning processes. The inner core represented the woman's self definition, her unique personality and personal circumstances. Funnel shaped, ideally it spiraled through the sphere of influence in an ever widening cone. Peck (1986) explained that the walls between the cores could be elastic or constricting, depending upon the amount of control the environmental factors and personal relationships exerted upon a woman's development of her self -knowledge, changing roles, and needs at various time intervals over her life span.

Though Peck (1986) clearly delineated, in her model, that history and society influenced the development of women, she did not depict how women shaped the development of history and society. This omission potentially contributed to stereotypes which placed women in the recipient rather than the generative role of knowledge creation. Little follow up research has been conducted to critique the application of Peck's (1986) model to learning paths of women.

Rather than examining learning in relation to women's development over time, Maher and Thompson-Tetreault (1994) examined women's learning processes within the confines of the classroom. If one accepted Scott's (1991) notion that the learning processes that women used were based on habits of survival over time and are generalized to multiple environments, then one could conclude that the learning processes that Maher and Thompson-Tetreault (1994) identified also generalized beyond the

parameters of the classroom.

The four crucial themes that emerged from their work fit within and illuminated the complexity of social, historical and relational factors in the model proposed by Peck (1986). They elucidated the bidirectional influence of environmental factors and the women upon one another that was missing from Peck's (1986) model. These themes included: mastery, voice, authority, and positionality.

Maher & Thompson Tetreault (1994) suggested that for women, mastery did not just mean rational comprehension of ideas by a few experts. Rather, it implied the pooling of cognitive, emotional, spiritual, and experiential knowledge from multiple sources, the examination of the complex layers of this knowledge from alternative perspectives, the co-existence of this knowledge with one's life, and the distributiveness of expertise. Coming to voice referred to the process by which learners fashioned their own voices in concert with others to construct new and multi-faceted dimensions of knowledge. In this process, issues of gender, race, class, sexual orientation, ethnicity, and physical capacities created possibilities and limitations for the shaping of voices. In their study, they also identified that socioeconomic class, ethnicity, culture, sexual orientation, and educational level of the women, in addition to historical biases, denoted the amount of authority awarded to or imposed upon them. The final and most crucial theme for Maher and Thompson-Tetreault (1994) was that of positionality. It illuminated the intersecting positions of privilege and oppression that each women experienced as a result of historical and social contexts, time paradigms, and the spheres of influence exerted upon and by her. It reflected relationships of power both within and outside the classroom,

within and outside a group and its impact on learning opportunities/barriers for women.

As critics challenged the homogeneity of research samples in male models of adult learning and development, they have begun to do so for those about women (Collins, 1991; Johnson-Bailey & Cervero, 1996; Tisdell, 1995). Most research on women's learning and development focused on middle class, Caucasian, heterosexual, young to middle age females. Additional research needs to include cross cultural samples of women and homogeneous samples of women from specific cultures to test assumptions about women's learning, and to understand whether such assumptions are culturally inclusive or culturally exclusive. Most studies on women learning have examined the process from a fixed period of time. They have tended not to connect women's learning explicitly to women's development nor to consider their learning paths through time. Similar to the studies on learning, the studies on the learning paths need to consider those of women from diverse groups rather than to assume racial and cultural neutrality.

African American Women's Learning

Collins (1989, 1991) argued that African American women have long held outsider status with respect to the generation of knowledge within academic settings. In the late 1800s, women, in general, were barred from institutions of higher education because it was believed that intellectual pursuits would damage their reproductive capabilities. For African American women, in particularly, advancement in education was additionally restricted because it would disrupt the subservient role they were forced to assume.

Similar to that for White women, those institutions that did open for African American women during the turn of and through the early twentieth century, such a s Spelman and Bennett, served as finishing schools to prepare African American women for their roles as wives and mothers in middle class society. Though a few African American women did earn college degrees through the first half of the twentieth century, most remained routinely excluded from the White and older private colleges. Under the guise of northern progressiveness, it was commonly believed by the White community that the future for Black women lay in domestic work (Coleman-Burns, 1989).

As a counter to this exclusion from formal educational systems, Black women united together in national organizations and local clubs. An example of such an organization was the National Council of Negro Women which formed as a merger of the National Federation of African American Women and the Colored Women's League in 1935 under the leadership of Mary McLeod Bethune. This organization, as well as the local clubs, became central for providing leadership opportunities and for addressing educational, professional, industrial, economic, social service concerns of Black women and the Black community across all social classes (Gilkes, 1990).

In the 1960s, the doors of higher education opened more, at least officially, to women of color (Coleman-Burns, 1989). Systems of oppression, however, as reflected in institutional admission practices, knowledge production, knowledge validation, faculty-student interactions, etc., perpetuated the negation of African American women's capacities (Johnson-Bailey & Cervero, 1996). As a result, African American women sought alternative settings, such as music and literature, daily conversation and daily

actions, for the expression of their voices and for the production and validation of knowledge (Coleman-Burns, 1989).

Johnson-Bailey and Cervero (1996) and Scott (1991) contended that the knowledge and perspectives of African America women were distinct from as well as reflective of their dual membership in/separation from both women and African American groups. Such knowledge resulted from African American women's position of oppression, unique economic and political status, lived-experiences, and extended sisterhood.

In oral history interviews with four African American women who had earned higher education degrees, were politically conscious, had achieved economic success, and had assimilated into the dominant culture, Scott (1991) identified that African American women learned habits of surviving that were passed down from one generation of African American women to another. These learned habits of surviving, regardless of whether they were emancipating or self negating, were taught by example and were an unquestioned component of African American women's socialization processes. They reflected internalized and externalized oppression, internal adaptation, and external compromises to racism, sexism, and classism. They allowed African American women to manage their anger and pain, to give them a sense of control and hope, and to appear to function while accepting the dominant society's prejudices against them. Through these habits of surviving, the women learned to suppress demonstration of feelings, appear strong, and to assume responsibility for the care of their children, Black men, and the White world, while simultaneously being dominated by the latter two. The cost for such learned habits of surviving for many Black women has been homicide, suicide, drug

addiction, and community activism burn out (Scott, 1991).

Collins (1989, 1991) proposed that the contours of Afrocentric feminist epistemology included: concrete experience as a criterion of meaning, the use of dialogue in assessing knowledge claims, an ethic of caring, and an ethic of personal accountability. From the narratives of African American women from all walks of life, Collins (1989, 1991) summarized that African American women valued wisdom based on lived, everyday experience collected through the generations over that gained through texts, viewing the former as crucial for survival. As well, they respected the active engagement of participants in dialogue as an essential component of the learning process. Through use of active voice, call-and-response patterns, and the blending of words with actions, an individual gained wisdom, and a sense of empowerment within the context of the community. African American women also valued an ethic of caring which prized wisdom that came from the heart, wisdom that saw each individual as a unique expression of the common spirit, and personal differences as complimentary and co-existing. Dialogue infused with emotion reflected this ethic of caring, blended cognitive and affective processes, and gave validity to the argument. Finally, Collins (1989, 1991) postulated that African American women believed individuals were personally accountable for their learning processes and knowledge claims. Personal experiences were not separate from or less than but integral to knowledge production. Within this framework, reason, emotion, and ethics held equal, interconnected importance.

Sheared (1992) expanded upon these themes, proposing that the womanist perspective acknowledged them within the triangular relationship of race, gender, and

class. For Sheared (1992), such a perspective validated the polyrhythmic realities of the lives of African American women. Borrowing from the works of Barkley-Brown (1990), Sheared (1992) drew an analogy between the works of Collins (1991) and the pieces of clothing from everyday life and heirlooms in African quilts. She proposed that both reflected the interconnectedness of knowledge and the polyrhythms of dialogue that went beyond defined forms to express the communality of experience and the multiplicity of realities.

That the themes of experiential wisdom, knowledge through personal dialogue, ethic of caring, and personal responsibility also repeatedly emerged in those studies that shared the narratives of African American women about their learning, regardless of whether or not the researchers of those studies specifically addressed the themes, gives credence to Collins' (1989, 1991) argument that they are fundamental to the way in which African American women know the world (Gilkes, 1982; hooks, 1984, 1989; Johnson- Bailey & Cervero, 1996; Jones; 1992; White, 1990). A more systematic study of these themes in African American women's narrative would inform the discussion about the generality of Collins' (1989, 1991) work. As Collins (1989) poignantly identified, the recognition of a unique Black feminist knowledge must withstand the validation rigors of the Eurocentric male academy, the community of Black women scholars, and African American women's daily experiences.

Johnson-Bailey and Cervero (1996) provided additional insight into those factors which affect the learning processes of African American women. An analysis by Johnson-Bailey and Cervero (1996) of the narratives of eight African American women who

reentered higher education revealed that issues of racism, sexism, classism, and colorism continuously filtered through their undergraduate and graduate experiences. They viewed these higher education experiences as duplicative of the power structures of the larger society and thus used coping mechanisms similar to those they used within the larger society to survive.

Coping mechanisms to deal with racism, sexism, classism, and colorism included silence, negotiation, and resistance. Silence required a negation of one's own voice and a muffling of one's own spirit to create a zone of safety. Negotiation involved the balancing of race, class, gender, and color dynamics, and the care of others at the cost of one's health. The women identified that they had learned through their families, schools, communities, and workplaces to use silence as a cocoon and negotiation as a bargaining tool for freedom. Acts of silence and negotiation occurred both internally and externally. Resistance, the least used of all coping mechanisms, occurred at pivotal times in the lives of the women. An external act, it was carefully chosen after much deliberation and internal strife as to its consequences upon their educational paths (Johnson-Bailey & Cervero , 1996).

Common motivational factors for these women to pursue their learning paths included persistence, belief in the importance of education to their survival, emotional support from other individuals, a directive to do better than their mothers, and a responsibility to the larger community. They saw education as necessary but not a guarantee for career advancement, cognizant of racial and gender discrimination as constants within their lives (Johnson-Bailey & Cervero, 1996). Similar to the ways

Collins (1989, 1991) identified that African American women learn, Johnson-Bailey & Cervero (1996) also highlighted experiential knowledge transmitted through generations of lived experiences, dialogue rich with oral history, commitment to caring for the whole community, and a sense of personal responsibility as paramount to the learning process.

From in-depth interviews with African American women who held college presidency positions, Robinson (1996) summarized several common learning threads: (a) the women recognized their potential for learning and leadership at an early age; (b) they received strong motherly guidance; (c) they were committed to life-long learning; (d) they learned through connectedness to one another, to mentors, and sororities; and (e) they developed political astuteness and strong interpersonal skills. African American women's leaders learning paths were filled with complexities and contradictions in which racism, classism, and sexism were constants but not excuses, and in which reality combined past and present, attention to the margins and the center (Gostnell, 1996). Spirituality gave meaning to the learning processes and a method for coping; personal growth resulted from the learning experiences and the meanings attached to them (Mattis, 1995).

African American Women's Learning within the Predominantly Caucasian, Female Profession of Occupational Therapy

Though a few studies have addressed learning of African American women (Collins, 1991; Johnson-Bailey, Cervero, 1996; Robinson, 1996), missing from the discourse is an analysis of the learning paths and system influences for African American women who

learned within professional education environments that were predominantly female and Caucasian. Though some studies suggested that an all-female learning environment positively positioned women to succeed to a greater extent than did a gender heterogeneous environment, (Galligan, 1989), one needs to cautiously review the applicability of such results to African American women within such a predominantly all-female, Caucasian environment. These all-female learning environment studies were conducted on graduates from private, predominantly White, religiously affiliated colleges whose students or their families could afford such tuition. The studies used the term, women, generically without also addressing issues of positionality, privilege, and oppression as related to race, class, or cultural background.

Only one unpublished dissertation could be found which compared the occupational status of African American and Caucasian women who had graduated from occupational therapy education programs (Bolden, 1993). Surveys were mailed to 215 therapists, 43% who were African American and 57% who were Caucasian. African American women were over sampled in relation to the number who were occupational therapists to generate relatively equal number of respondents in both groups. Demographically, both groups were similar in age, years of experience, and work patterns. The study found that African American women experienced racial discrimination in their educational paths and racially related setbacks in their work experiences, though they enjoyed similar economic success as their Caucasian counterparts. Compared to the Caucasian therapists, the African American therapists tended to come from working class families whose mothers were more frequently employed on a continuous basis outside of the home, and whose fathers

received less formal education. More Black than White therapists held educational credentials higher than those minimally required for practice, though they needed to work for longer periods of time to receive managerial status. They identified that they experienced isolation as professional Black women. Missing from the study was an in-depth description or analysis of the learning paths the women negotiated to achieve occupational success, as well as of the opportunities and barriers to access to these learning paths (Bolden, 1993).

No other studies could be found within ERIC, Medline, LIAS, DAI, or AOTA dissertation data bases which specifically addressed the learning paths for African American women within the predominantly female Caucasian profession of occupational therapy. As well, no studies could be located within these same data bases that recorded, let alone, analyzed the learning paths for African American women that led them to positions of prominence within that profession. The lack of such studies begs an analysis as to why there has been little formal attention to this topic, and how the existing informal and formal professional educational systems within occupational therapy support/hinder the learning and leadership opportunities for African American women.

Women in Leadership

This section of the literature review analyzes studies related to women's leadership with specific emphasis on African American women's leadership. It highlights limitations within this area of research. It concludes with a discussion of the importance of expanding such research to understand how African American women achieve positions of prominence within the predominantly female Caucasian profession of occupational therapy.

Development of Research about Female Leadership Within Male Leadership Models

Prior to 1970, research about leadership, though couched within generic terms, pertained primarily to White males (Christ, 1994; Kovalainen, 1988). That women held only 0.1 percent of managerial positions between 1950 and 1970 factored into the omission about research on women in leadership during that time frame (Friesen, 1983). Three theoretical perspectives within this male leadership research included: the great-man theory, trait theory, and personal-situational or contingency theory. The great-man approach assumed that a person possessed innate, superior abilities to lead the masses. Trait theory assumed that a core set of characteristics and skills associated with leadership could be enumerated. Personal-situational theory proposed that, in addition to traits of the leader, the nature of the situation in which leadership occurred, determined the

effectiveness of the leadership style (Feldman, 1986). Not surprisingly, since most of these studies were conducted on males, the list of innate abilities, characteristics, and skills that emerged were those often associated with male behaviors (Friesen, 1983). A further analysis of this research revealed, however, that there was not a singular, definitive description of the personality or traits of a leader, nor were important components of leadership associated exclusively with male stereotype characteristics (Friesen, 1983; Macomb & Jacklin, 1974; Schein, 1973; Stogdill, 1974).

Within this male centered research framework and in response to affirmative action, an increase in the number of women in the labor market, and the women's movement, research about women in leadership emerged (Friesen, 1983). Initially, the early female leadership research focused on a comparison of biologically governed, gender-specific traits, and the need for women to adopt assertive, male characteristics to function as effective leaders (Golub & Canty, 1982; Schein, 1973, 1975). Men's capacity to lead was perceived to be the result of skill; women's capacity to lead was perceived to be the result of luck, hard work, and overcompensation for lack of ability (Green & Mitchell, 1979). Inherent was the assumption that male leaders were more authoritative and task oriented and that female leaders were more nurturing and focused on human relations (Friesen, 1983). Though judged against male standards, those women who demonstrated aggressive, competitive behaviors were criticized as being unfeminine (Putnam, & Heinen, 1978). Absent from these early studies on women in leadership was a critique of the cultural assumptions which framed the type of investigations, the perceptions of the respondents, and the ways women could and did lead.

Socialized Roles of Female Leadership

That such studies resulted in contradictory findings shifted the line of inquiry from biologically based to socialized roles as determinants of leadership style (Adkinson, 1981). Such studies proposed that the nurturing characteristic attributed to female leaders was more a reflection of their subordinate role within the hierarchy of society and management structures than a biologically related trait. Within these relatively subordinate roles, women needed to be more sensitive to the feelings of their male superiors than did the male superiors need to be of the feelings of women employees. Since women filled only five percent of the upper level management positions (Powell, 1993), women in most levels of management were expected to portray stereotypes of gentleness and emotionalism rather than high level, male management stereotypes of aggression and dominance. Those women who displayed these latter characteristics were criticized and denied advancement (O'Leary & Ickovics, 1992).

Characteristics of Feminine Leadership

As impetus for a shift in Western paradigms away from a mechanistic rationale to a more relational view of the world grew (Capra, 1982; Schwartz & olgilvy, 1979), research about the processes by which women led expanded (Parker & ogilvie, 1996; Rogers, 1988). This shift led to: (a) decreased emphasis on linear causality, hierarchical structures, objectivity, and independency; (b) increased focus on complex, contextual,

inter-relational paradigms; and (c) appreciation for the role of experience, belief systems, and culture, on the conceptualization of mutual realities (Rogers, 1988). As well, it re-centered the focus away from power, technical skills to solve problems, and strategies to gain employee compliance toward transformative leadership, vision, and empowerment (Bennis, 1985; Burns, 1978; Rogers, 1988).

Loden (1985) outlined a model for feminine leadership characterized by cooperation, collaboration, team work, shared accountability, intuitive-rational thinking, empathy, and high standards of performance whose objective was quality output. In contrast, Loden (1985) delineated a masculine model of leadership marked by competition, rationality, analytical-unemotional reasoning, whose goal was winning. Rather than viewing feminine and masculine leadership models as mutually exclusive, Loden (1985) argued for their complementary and selective utilization.

The results of a survey conducted by Rosener (1990) for the Leadership Foundation of the International Women's Forum, supported Loden's (1985) Feminine Leadership Model. Rosener (1990) mailed surveys to all members of the International Women's Forum, a forum comprised of prominent women leaders in diverse professions from Asia, North America, Europe, Latin America, and the Middle East. She mailed identical surveys to men whom the female respondents identified as similar to themselves regarding age, occupational responsibilities, and education. The mailed survey was followed by interviews. In contrast to the men who described their leadership style as transactional, a series of transactions with subordinates to accomplish a task, the women described their leadership as transformational, a process to transform the self interests of

the subordinates into group interests for the attainment of the broader goal. Unlike the men who attributed their power to their organizational stature, the women attributed their power to hard work, interpersonal skills, and personal contacts. The women leaders described themselves as primarily utilizing interactive leadership to foster participatory management, inclusionary environments, shared power and recognition, group identity, and a sense of self worth of others. These women also identified their capacity to use more directive leadership styles when participatory management did not match the environmental or situational demands. As a consequence of their preferred interactive leadership style, the women recognized that they expended additional personal energy and time to reach decisions, as well as placed themselves at increased risk for challenges to their decisions.

Rosener (1990) then explored the context in which these women developed their leadership capacity. All but one woman worked in medium size, fast growing organizations with high demand for performance or a high proportion of professional workers. Because of the changes that these companies were undergoing, the women concurred that they had more freedom and opportunities to develop nontraditional or inclusionary management styles and to gain credibility by achieving results. In contrast, Rosener (1990) speculated that the masculine leadership style identified by Loden (1985) was more effective in large scale, established organizations where those who were the strongest and most decisive gained control of the resources.

Rosener (1990) further postulated that the preference of the respondents for interactive leadership reflected the roots of their leadership socialization process within

community volunteer or helping professions which emphasized cooperative interactions, nurturance, and empathy in the provision of services to others. As these women assumed management responsibilities within business, they initially filled staff rather than line positions that required them to support others with little formal authority over budgets or personnel. Within these job constraints, they continued using and refining an interactive leadership style to accomplish their responsibilities. As they gained access to more formal authority and resources, they continued to utilize that leadership style which proved successful to them in the past.

Rosener's (1990) analysis of these contextual influences provided an important perspective for understanding more current studies on the processes by which women lead. These studies outlined a feminine model of leadership that was based on an female ethos of interdependent love and duty that emphasized intuition, relationships, and cooperation and that was framed within women's social, historical, and cultural experiences (Astin & Leland, 1991; Belenky, Clinchy, Goldberger, &Tarule, 1986, 1997; Gilligan, 1982, 1993). In these studies, female leaders were described as having high levels of self-esteem. Effective communicators, they displayed characteristics of intelligence, curiosity, courage, creativity, vitality, perseverance, warmth, and flexibility. They led with a sense of vision, ethics, and concern for the welfare of the group. They had a clear sense of themselves, their histories, their capacities, and their future aspirations (Astin & Leland, 1991). Reared to be caretakers, they defined themselves in relation to others, promote participatory decision making, and measured their success through the relational achievement of others (Astin & Leland, 1991; Gilligan, 1993;

Morrison, White, Van Velsor, & the Center for Creative Leadership, 1992).

Though debate continues to occur as to whether or not there exists a distinct form of feminine leadership, an increasing number of studies suggest that, in comparison to men, women tend to prefer a more democratic leadership that emphasizes relationship with others in a context of interdependent responsibility and care (Astin & Leland, 1991; Blackmore, 1989; Friesen, 1983; Gilligan, 1993). One cannot conclude from these studies that women display characteristics associated only with feminine rather than masculine models of leadership nor, conversely, that men display characteristics associated only with masculine rather than feminine models. However, the studies do suggest that gendered socialization processes strongly influence the type of leadership styles that individuals can and do develop and utilize to manage human and non-human resources within organizations.

Women in Executive Leadership Positions

Few studies addressed the transition of women from middle to higher or executive levels of leadership. Those that did identified that these women entered into a culture that was dominated by White men who were more comfortable interacting in a male managerial hierarchy with other men than with women. Though women held 42 percent of administrative positions by 1993, only two percent held top executive positions (U.S. Department of Labor, 1993). In such environments, women found themselves at a distinct disadvantage to learn an organizational culture which they did not create nor control and

which tended to inhibit their training (Morrison, et. al, 1992; Ruderman, Holst, & Kram, 1995). In a survey of over 400 women who held executive positions, sexism was identified as the primary barrier to their advancement (Korn-Ferry, & UCLA, 1993). In spite of little personal support from their predominantly male peers, they were expected to demonstrate leadership over people without formal authority to do so (McQuarrie, 1994). Political savvy was their key to their leadership success (Mainiero, 1994). A qualitative study of executive women in Fortune 500 companies identified that executive women learned corporate culture and thus adapted their leadership skills through cognitive learning opportunities that included formal learning, self directed learning, and critical reflection; experiential learning that included observation and direct experimentation; and collaborative learning that involved mentoring relationships, peer supports, and network systems. Within this environment, they needed to accept White male dominance as an organizational reality, learn how to diffuse the centrality of power through alternate leadership strategies, and create their own learning opportunities in spite of organizational advancement opportunities that differentially disfavored women (Bierema, 1996).

African American Women's Leadership

Though few studies addressed how women, in general, learned executive leadership skills, even fewer studies addressed how African American women learned leadership skills. Similar to the studies about women's learning, research on women in leadership has come under scrutiny for assuming that the term women is generic, and representative

of all women. An investigation of the women leadership studies revealed that most of the research was conducted on White females from middle to upper middle class backgrounds. Inherent was the belief that issues of minority status confronting women of color were similar to those confronting White women.

Those limited studies on the leadership of African American women challenged the universality of these White female, leadership assumptions (Bell, E., Denton, T., & Nkomo, S., 1993; Batter- Reed & Moore, 1992; hooks, 1989, Nkomo, 1989). They underscored that African American women held only 0.9 percent of the female corporate office positions (Bakerville, Dillard-Tucker, Whittingham-Barnes, 1991). They earned 84 percent of the salary of White women and less than 50 percent of the salary of White men (Bettera-Reed & Moore, 1992; Dreyfus, 1990; Nkomo, 1989). hooks (1984, 1989) and Nkomo (1989) contended that the generic application of the term women allowed White women to avoid working through their own issues of racism and privileged positions within the dominant, Anglo culture.

A few studies compared the leadership characteristics of Black and White women. These studies reached complementary conclusions (Jones, 1992; Parker & ogilvie, 1996; White, 1990). Jones (1992), in a survey of 17 African American women college presidents, found that they described their leadership as transformational, combining feminine and masculine traits to facilitate direct participation, empowerment, team building and vision creation. Similarly, through in-depth interviews with seven African American women who held executive positions, White (1990) concluded that strategies for leadership success included: risk taking, campaigning for themselves through

highlighting of achievements, and establishing networks, especially with Black, female colleagues. Contrary to stereotypes which labeled African American women as loud and aggressive (Weltz & Gordon, 1993) and Caucasian female leaders as supportive and nurturing, White (1990) found that the Caucasian female leaders in the firms where she visited were perceived as aggressive and verbally abusive, whereas the African American female leaders were perceived as respectful of individuals and their ideas.

Building upon the work of Jones (1992) and White (1990), Parker and ogilvie (1996) proposed that because of socialization processes, their unique social location within the dominant culture, and the context in which they led, African American women demonstrated leadership characteristics that combined Anglo American female and male leadership styles. In A Culturally Distinct Model of African American Executives' Leadership, they outlined that African American women leaders were socialized to demonstrate: assertiveness, independence, autonomy, androgyny, self-confidence, strength, and direct communication skills. Parker and ogilvie (1996) proposed that African American female leaders employed bicultural, avoidance, and confrontational strategies to lead within a context of racial and gender discrimination, devalued leadership abilities, complex organizational interactions, and expectations for high performance. Thus, as leaders, they were: creative, risk takers, boundary spanners, and divergent, complex thinkers.

Several studies explored the barriers African American women faced and strategies they employed as leaders within business and higher education (Bell, 1990; Bettera-Reed & Moore, 1992; Gilkes, 1982; Moore, 1995; Morrison & Glinow, 1990: Nkomo & Cox,

1989; White, 1990). Barriers centered on the interface of racism and sexism and included interpersonal, organizational, recruitment, and cultural issues (Bettera-Reed & Moore, 1992; Morrison & Glinow, 1990). For example, if an African American woman made a mistake in the corporation, it was viewed as a consequence of her Blackness and femaleness. System-wide organizational planning regarding diversity was rare with preference on conformity versus respect for differences (Nkomo, 1989). In a survey of 71 career-oriented, African American women, Bell (1990) found that they negotiated a bicultural lifestyle, often suppressing their dress and hair style, language patterns, personal and political values to succeed in the organizational culture. Access to influential mentoring relationships was limited and often provided a narrow range of benefits (Morrison & Glinow, 1990). When those mentors were White males, historical images of the White male slave owner and the Black female concubine sometimes surfaced, constricting the ability of the women to view the mentoring process as a supportive rather than a controlling process (Thomas, 1989). Career tracking also was limited; African American women often were placed in managerial positions at the staff level without budgets, personnel, or upward mobility potential. Complicating these issues was the competing loyalty the women felt toward their families and Black communities versus the organization. When the women found themselves in competition with a Black man for the same job, they deferred to the Black man as a gesture of protection (Bettera-Reed & Moore, 1992).

In a comparative study of 165 male and 118 female non-student members of the National Black MBA Association, Nkomo & Cox (1989) found that though both groups

experienced the same rate of upward mobility, the men held greater seniority and the women earned higher job performance ratings. The women were more likely to advance within their jobs when they worked for larger companies and took advantage of mentoring opportunities. In addition, for African American women to hold senior-level administrative posts within institutions of higher education, Moore (1995) found that it was essential for them to develop coping skills to deal with the racism and sexism, possess self-confidence and self-motivation, attain advanced degrees, and demonstrate effective communication, leadership skills, and a commitment to their work.

Using an oral history research methodology, Talley-Ross (1991) interviewed a select group of 17 African American women who were practicing in male dominated professions of medicine, law, journalism, and corporate management. Themes related to their career success included: parental promotion of optimism, parental and self-promotion of self-reliance, support for attending traditional Black universities of higher education, church affiliation, and positive accommodation of racism. Racism and sexism were inhibiting factors to their goal attainment, with racism being the predominant factor. Positive self definition, as a result of parental rearing practices which protected them from racial hostility as children, enabled them to "move around the walls of racism" as adults (p. 126). The women learned to be bicultural, consciously selecting White middle-class female standards of dressing and speaking within their work environments, as well as functioning as a cultural broker between Black clients and White employees within these work environments. They sustained affiliations with Black professional sororities and displayed a commitment to the betterment of the African

American community. They described egalitarian distribution of power within the homes of their childhood, and in their relationships with their spouses or male friends. They viewed their accomplishments as a natural evolution of events fueled by their will to succeed.

African American women who held leadership positions within community-advocacy organizations identified that they needed to carefully balance the demands of their professional membership with a critical analysis of the practiced ideologies of that profession, especially when those ideologies were grounded in dominant cultural beliefs that devalued or misrepresented the capacities of minority cultures (Gilkes, 1982, 1991). Similar to those areas identified by Collins (1991) as ways in which African American women learn, the women in Gilkes' (1982, 1991) study described that their capacity to lead innovative, effective community organizations was based on: (a) knowledge rooted in practice rather than academic credentials; (b) interactive dialogue with all members of the community; (c) a commitment to duty to the entire Black community at the expense of concern or material gain for self, with concurrent responsibility to uphold high moral demands associated with their leadership positions; and (d) a sense of caring for the Black community that enabled them to lead with sensitivity, flexibility, and advocacy for the empowerment of others. Essential to sustaining them in their leadership roles were memberships in Black professional caucuses and organizations. Such memberships provided social linkages and a foundation for communicating professional disagreements with the dominant, White professional organization (Gilkes, 1982, 1991).

African American Female Leadership Within

the Predominantly White Female Profession of Occupational Therapy

Though the above mentioned studies make explicit the multiple factors of racial and gender discrimination complicating access to and the role of leadership for African American female leaders in male dominated institutions of business and higher education, what remains unclear is the complexity of those issues for African American women who hold leadership positions within predominantly Caucasian, female professions, in general, and occupational therapy, specifically. A search of ERIC, Dissertation Abstracts International, the AOTA dissertation collection, and LIAS did not reveal any studies that investigated this topic.

Only three studies addressed issues of leadership for those who held academic program directorships in occupational therapy (Dudek-Shriber, 1997; Miller, 1982; Sieg, 1986). No studies could be found that investigated the leadership characteristics of those individuals who held national office or other positions of prominence within AOTA.

Applying role and role conflict theory, Miller (1982) found that most program directors acquired rather than aspired to the program director role. They may or may not have had formal education in administration and leadership; struggled to negotiate differential expectations by faculty, the deans, and themselves about the role; and left the role at a 20% attrition rate to resume faculty teaching roles, other administrative

responsibilities, or retire.

Sieg (1986) used a job analysis format, related literature, and her own experiences to outline patterns of work responsibilities for occupational therapy departmental chairs. Based on a survey of the departmental chair positions of the 56 professional occupational programs that existed in 1984, she concluded that they were predominantly female, held the position for 6 years, and supervised 6.4 full time faculty. Their tasks centered on administrative functions dealing with data management, people issues, and resource allocation. No statistics were given as to the number of these directors who were African American women. She concluded that few therapists considered academics as a role choice, and even fewer considered program chair as a possibility. She postulated that the lack of formal administrative preparation coupled with the frustrations of juggling administrative with teaching responsibilities, and the limited number of occupational therapists who held doctoral degrees at the time (134), served as deterring factors .

Dudek-Shriber (1997) surveyed 185 faculty in 65 accredited occupational therapy programs to investigate their perceptions of the leadership capacity of their program chairs, the organizational health of the departments, and the relationship between these two variables. The faculty rated the leadership quality of the directors as average on the Leader Behavior Questionnaire but rated organizational health that the directors had created as very high on the Conway Organizational Health Assessment. Being respectful, trustful, organizationally focused, and developing an organizational culture were those leadership characteristics that the faculty identified the program directors most displayed.

Missing from the study was information clarifying the reason for the ratings and justifications to substantiate the selected survey responses.

These studies did not answer questions central to the purpose of this current research endeavor. They did not provide clues as to the learning paths the African American women followed that facilitated their ability to hold positions of prominence within occupational therapy. They did not address how African American women differentially experienced or displayed leadership in a professional organization that was predominantly female. They did not suggest rationales for how these women achieved such positions of prominence when only 2.6 percent of all female and male occupational therapists and 5.4 percent of all occupational therapy assistants were African American. They did not examine how African American women negotiated the bicultural pulls of working in a Caucasian, female health care profession, the network and mentoring systems they created for themselves, the professional-cultural dichotomies they resolved, nor racial and gender inequities they confronted.

Summary of Literature Review

This literature review investigated the history of occupational therapy, women's learning, and women's leadership as they related to the learning paths of African American women who held positions of prominence within the predominantly female, Caucasian profession of occupational therapy. Post structural and Black feminist thought provided a perspective for critiquing the literature.

The results of the literature review related to occupational therapy reveals that its history is built upon a predominantly White, middle to upper middle class, female culture with little documentation or understanding of how African American women enter into, negotiate through, and contribute to its development. The review of the literature on women's learning indicates that, though some work has been done in this area related to women as a generic group, studies exploring how African American women learn have only just begun. Those studies related to women, generically, suggest that women learn primarily in gendered relationships with others; however, most of these studies are conducted on middle class White women, without regard to issues of race and class. In contrast, studies about African American women emphasize that their learning is situated within and impacted by a context of racism, sexism, classism, and colorism. Missing from many of the generic and African American studies on women's learning is an understanding of the learning paths of women as they occur over time and in relationship to their development.

The literature review on women's leadership results in similar conclusions to those on women's learning. That is, present studies on women in leadership conclude that the manner in which they can and do lead is affected by their gendered relationships to others. However, most of these studies are conducted on White middle class women or apply the term women generically without regard to issues of race, class, and color. Those limited studies on African-American women in leadership suggest that issues of racism and sexism add additional complexity to as well as responsibility within leadership roles.

The literature review reveals the dearth of studies addressing learning or leadership

for African American women in occupational therapy. No studies exist which analyze or propose a model for understanding the intersecting themes of African-American women's learning and leadership within the framework of learning paths to positions of prominence in the predominantly female Caucasian profession of occupational therapy. It is the intent of this current study, therefore, to gather rich, thick descriptions from interviews with African American women leaders in the occupational therapy profession that will allow for an understanding of these complex issues.

Chapter 3

METHODOLOGY

This chapter reviews the purpose of the study. It provides a description and rationale for its design, a summary of the qualification of the researcher, a clarification of the bounds of the study, and an overview of ethical considerations. It presents an explanation of the data collection methods, data analysis strategies, and verification procedures.

Purpose of the Study

The purpose of this research was to gain and understanding of the learning paths of African American women who held positions of prominence within the predominantly Caucasian, female profession of occupational therapy. Specifically, the research questions explored the processes by which these women learn and develop throughout their life span; the personal, family, and societal expectations and support systems they experienced as well the opportunities and barriers they encountered during their life span; and, the strategies they employed to succeed in their educational and career paths.

Design Overview

This section explains the research methodologies that governed the study. Specifically, it furnishes a justification for the use of an oral history approach within the qualitative research paradigm to gain a phenomenological understanding of the lives of the participants.

Qualitative Research Paradigm

Studies that seek to understand the meaning and processes of context specific phenomena using inductive logic and the researcher as the primary instrument are best suited to qualitative paradigm. The qualitative research paradigm differs from the quantitative paradigm in its philosophical assumptions about research, the nature of the problem, the role of the researcher, the use of literature, the type of question or hypothesis formulated, the methodology, and the applicability of outcomes (Merriam & Simpson, 1995). Factors that influence the selection of the qualitative research paradigm include the exploratory and inductive nature of the research question, the limited amount of existing research and theory related to the topic of investigation, and the specificity and availability of the sample the unique context of the study (Merriam & Simpson, 1995). The list below highlights assumptions related to the qualitative paradigm:

1. Reality is constructed; it is subjective and reflective of the multiple perspectives of the participants.

2. Knowledge is value and context laden.

3. Theories can be developed from the study or frame the topic of investigation.

4. Research, based on a question, provides a tool for exploring issues or emerging patterns and themes.

5. Reasoning can occur inductively and emphasize the multiple, simultaneous shaping of factors.

6. The researcher interacts with that which is being researched and brings to study a set of biases which he or she makes explicit.

7. The researcher seeks to understand, discover, describe, or find meaning of context specific phenomenon rather than to compare, prove, or generalize findings.

8. The researcher may conduct ethnographic, grounded theory, case study, or phenomenological research to collect thick, rich information from a small purposive sample.

9. Factors are observed in the field, in the naturalistic context; data are mediated through a human instrument.

10. Accuracy and reliability are obtained through verification such as achievement of redundancy, member checks, and multiple information sources.

(Babbie, 1998; Creswell, 1994; Merriam & Simpson, 1995).

Phenomenological Research Design.

This study employed a phenomenological research design consistent with the qualitative paradigm. In the phenomenological research design, the researcher suspends judgement about a specific hypothesis to explore the complex and intersubjective meaning of everyday experiences, particularly those everyday experiences whose inner meanings are little understood (Merriam & Simpson, 1995). Through systematic inquiry the researcher seeks to solicit thick, rich descriptions from and to bring to conscious reflection the perceptions, intentions, belief systems, and intuitions of the participants about the phenomena. By withholding judgement about and systematically analyzing the basic units, the researcher endeavors to grasp their meaning (Merriam &Simpson, 1995).

The phenomenological research design was most appropriate for this study because the study sought to uncover, through exploration and induction, an in-depth understanding of the processes by which African American women learned and assumed positions of prominence within a context specific environment. As well, the phenomenological research design was most appropriate because there existed little recorded history as to how these processes have occurred; little research to provide a theoretical foundation for understanding them; few African American women who satisfied the operational definition of and boundaries of the research study; and, no quantifiable survey instruments appropriate to the purpose of this the study. In addition, the philosophical underpinnings of the study were most consistent with those of the qualitative paradigm in that the reality the women in the study experienced was subjective

and reflective of their multiple perspectives, the context in which they learned and assumed positions of prominence was value laden, and multiple simultaneous factors shaped their emerging patterns.

Oral History Research Methodology.

This study employed oral history as the specific, qualitative, phenomenologically based, research method to interview a purposive sample of African-American women who held positions of prominence within the predominantly Caucasian female profession of occupational therapy. Oral history is a dynamic, interactive methodology that preserves the language, perspectives, and lived histories of the narrators. It involves the recording of in-depth interviews which allow for the inductive investigation of multiple and interrelated factors and makes tangible the unrecorded evidence that rests in the collective, memories of the narrators. Its intent is to engage in an expansive, thoughtful, directed discourse of a topic framed within the context of lived history of the persons to provide unedited, intimate, thick, rich descriptions of the parts and meanings of the narrators' lives (Allen, 1992; Yow, 1994).

In their critique of oral history, Anderson, Armitage, Jack, & Willner (1987) asserted that it was compatible with feminist frames of reference. They challenged that the assumption of traditional social science about synchrony between the thoughts and actions of individuals held true only for a certain class and race of males who have freedom of action. In contrast, oral history allowed for the exploration of the asynchrony

between thought and action of those other classes of people with limited freedom since it expanded upon the concrete details of the event to also encapsulate its relational and emotional components. In so doing, it provided a tool for incorporating those aspects and voices recorded history overlooks, for revealing hidden, alternative realities not explored from androcentric or positivist perspectives. It allowed for probing behind public statements, the recording of life histories and daily activities of people from all socio-economic and racial groups rather than just the rich and important, and the exploration of how the decisions of these people affected the aggregate (Yow, 1994). Within its communal nature, the collective memories of oral history transcended the personal experience to reflect the larger themes of historical consciousness (Allen, 1992).

Fields (1994), as a result of her own work in oral history, provided an important caution against the misrepresentation of the meanings of those historical events by oral historians. She warned against situating the stories within the cultural and meaning frameworks of the researcher rather than those of the narrator.

An oral history methodology was most appropriate for this study because few written documents existed and because oral discourse is valued as a legitimate source of knowledge by African-American women (Collins, 1991; Scott, 1991). As well, this methodology was most applicable because the past experiences of the women in the study informed their present experiences and because the multiple aspects of their lives were intertwined and interdependent. In addition, this research methodology was chosen because it was consistent with the way in which Black women shared knowledge with one another and preserved history (Collins, 1991).

It allowed for the discovery of the knowledge that did not exist in any other form other than the remembered stories of the lived experiences of these women. It elucidated not only the concrete details but the affective factors that influenced these processes. It allowed for the discovery of those details which were unique to each participant, as well as patterns among them. It allowed for the collaborative exploration between the women and the researcher of the multiple factors within a total life context of the processes that contributed to how they learned and assumed positions of prominence. It enabled the women to listen to their taped stories, provide member checks, and thus contribute to the analysis of the emerging themes. As suggested by Yow (1994), though memory of specific details may have been forgotten, levels of understanding deeper than consciousness were revealed, providing meaning to the experience.

Background of the Researcher

The researcher served as an occupational therapist for 24 years and taught occupational therapy history to five cohorts of students. She served as dual director of an occupational therapy and an occupational therapy assistant education program, and as a member of Program Directors' Council of the American Occupational Therapy Association Commission on Education at the national and state levels. She also served on a national level task force to address occupational therapy education practices for the future. Through these council and task force positions, she worked or dialogued with

several of the participants who held program directorship positions. As well, through these positions, she gained access to several participants who held national officer positions.

She received guidance from an expert in oral history methodology to conduct a pilot study with five African American women who held positions of prominence in the profession. In preparation for the dissertation, she shared the results of the pilot study at the National American Occupational Therapy Association Conference in April, 1998 and the National Oral History Conference in October, 1998.

As an occupational therapist, the researcher accepts the core tenets of the profession which include a belief in the intrinsic value and capacity of all individuals; respect for the divergent cultural and social backgrounds which inform people's lives and influence the occupations in which they engage; and, a commitment to advocate for societal policies and practices that create inclusionary daily living, work, and leisure environments. Conversely, as an occupational therapist, she is concerned that the profession, however unintended, has failed to adhere to such tenets in its historical recordings and its cultural formation. Believing that its recruitment, admissions, educational, and mentoring practices in occupational therapy perpetuated a membership which remains homogeneous with regard to race, gender, and class, she views it as her responsibility to try to help resolve this dichotomy.

This research project provided a venue for the researcher to gather resources to bring the dichotomy forward for public discourse, with the intent of challenging the profession to re-examine itself and its membership. By making copies of the interview tapes and

transcripts available to the profession through the AOTA Archives, the researcher hopes to offer professional validation and support for those present and future occupational therapists who share life histories similar to those of the women in the study.

Bounds of the Study and Data Collection

This section delineates the setting, the participant selection process, the focus of the study, and the ethical considerations. It clarifies the data collection, analysis, and verification procedures.

Setting

The American Occupational Therapy Association was chosen to serve as the backdrop for examining the learning paths of African American women who held positions of prominence. The American Occupational Therapy Association is an allied health profession founded in 1917. Its knowledge base is holistic and blends together educational, psychosocial, neuro-biological, and health related principles. Its goal is to enable individuals across the life span who are experiencing physical, sensory, cognitive, psychological, and/or social challenges to gain or regain skills to function as independently as possible within the context of their daily lives. It does so by using meaningful activities that enable people to engage in their daily living, work related, educational, and play-leisure occupations. It advocates for the adaptation of tasks,

methods for accomplishing the task, and the environment to maximize occupational independence.

The American Occupational Therapy Association was chosen as the specific professional organization because of its national recognition within the female dominated field of education and allied health, and because of its 90% White, female membership. The knowledge of the researcher about occupational therapy and her position within that organization facilitated her access to women who were willing to participate in the research. This knowledge and positionality contributed to the researcher's understanding of the environmental context of the study, and enabled her to interpret profession-specific language. The American Occupational Therapy Foundation, the research unit of the profession, and the officers of Black Occupational Therapy Caucus provided verbal endorsement for the research project.

Participants

A purposive sample of twenty two African American women who held positions of prominence within the occupational therapy profession served as the participants. The number of participants was based on the number of African American women who held directorships in occupational therapy or occupational therapy assistant education programs, were officers in state or national occupational therapy organizations, or were recipients of state or national awards. At the time of the study, fifteen of the participants were holding or had held directorship positions of academic programs; the other seven

currently were or had been directors of large rehabilitation programs. All had earned national association awards and had served on national or state occupational therapy boards and committees. Four were currently holding national office positions. Twelve had served on national boards and associations outside the profession of occupational therapy, or served as consultants to government agencies and national organizations. The other ten also served on boards or provided consultation to state and local agencies outside the profession of occupational therapy. Six held doctorates, reflective of all but two African American female occupational therapists in the United States who held such degrees at the time of the study. Overlap existed among all of the above categories.

Snowball sampling technique, professional news journals, and the researcher's personal knowledge of professional leaders were used to identify the participants. Potential participants were contacted by phone, face-to-face, and letter to detail the purpose and procedures of the study (See Appendixes A and B). All of those who were contacted agreed to participate in the study. The women represented multiple regions of the United States including the northeast, Mid-Atlantic, southern, north central, south central and west coast regions. As well, they represented several generations of African American female occupational therapists, spanning from thirty eight to eight two years of age.

Particular Focus

Particular attention was paid to the processes by which these African American women learned, developed, and assumed positions of prominence; the personal, family,

and societal expectations and support systems they experienced; the opportunities and barriers they encountered; and, the strategies they employed to advance in their education and careers. Attention also was paid to the emphasis they placed on particular aspects of their stories.

Ethical Considerations

In compliance with the Pennsylvania State University Office of Regulatory Compliance and oral history research methodology, each participant signed an informed consent form which delineated the purpose of the study and the right of the participants to withdrawal from the project, censor specific portions of the tapes, and place restrictions on the publication of the tapes. Each participant was asked but not obligated to sign a written consent form for the researcher to release copies of the taped interviews, the transcriptions, the biographical sketches, and the transcription indexes to the Occupational Therapy Archives following the termination of the study. The researcher will forward to the American Occupational Therapy Archives only that information for which a signed release was obtained. Consistent with archival procedures for oral history collections, it is the responsibility of the American Occupational Therapy Association to seek written consent from the participants for access to the data by other researchers and professional (Yow, 1994) [See Appendix A for the human subjects and informed consent forms].

Data Collection Procedures

Prior to the interview, the participants received mailed copies of: the letter of intent, a sample release form, an outline of potential topics for discussion, and confirmation of the time and place for the interviews (See Appendix B). The interview process occurred in two stages. The first stage occurred over the phone to gain demographic information about each participant, to identify journal articles, books, and/or videos completed by or written about her, and to request a copy of the participant's curriculum vita. This stage took approximately 30-45 minutes to complete. The second stage occurred at various locations, as determined by each participant. Two of the participants chose to conduct the second stage of the interview process over the phone. Fourteen of the participants chose to conduct the second stage of interview process at their place of employment, home, or another location designated by them. The remaining six chose to conduct the major portion of the interview at one of these sites, followed by a second interview over the phone. The purpose of the second stage of the interview process was to gather thick, rich descriptions of the lived histories of the women, with specific focus on their learning paths.

The details that the participants shared about their lives, rather than specific questions directed the interview. The second stage of the interview process lasted between two and one-half and seven hours, were audio taped and transcribed verbatim. Based upon the preference of each of the participants, the interviews occurred over one or

several sessions. Eight of the participants reviewed copies of the tapes and transcripts to insure accuracy of recording. The other transcripts were reviewed by independent readers.

Data Analysis Procedures

A constant comparative method was used to index and categorize emerging themes from the oral history interviews (Creswell, 1994). Each transcript was reviewed independently by the researcher for emerging themes. The biographical sketches shared by each woman also were analyzed independently. Then the themes from the transcripts and the biological data were compared across the participants to find consistency and redundancy of patterns. Ten of the tapes also were reviewed by peer reviewers for emerging themes. The themes identified by the peer reviewers then were compared with those identified by the researcher. Results were interpreted within the context of the history of the American Occupational Therapy profession and from post structural and Black feminist perspectives.

Verification Procedures

Researchers, such as Lincoln and Guba (1985), discussed issues of trustworthiness and authenticity rather than reliability and validity when referencing qualitative paradigms. They believed that qualitative research was context specific and that the terms, reliability and validity were more reflective of the generalizability and accuracy

focus of quantitative paradigms. To them, the terms trustworthiness and authenticity more accurately reflected the methodologies employed to strengthen the credibility of the qualitative findings (Merriam & Simpson, 1995). Creswell (1994), believed that detailed descriptions of the research methodology, the selection of informants, and the central assumption of the study, increased the likelihood of usefulness of the study to other settings. Creswell (1994) also believed that triangulation or convergence of information from multiple sources, member checks, and identification of how participants were involved throughout the study added to its trustworthiness and authenticity. Merriam and Simpson (1995) further suggested that peer or colleague examination, submersion into the research situation, audit trails, comparison of multiple researcher coding, use of expert panels, and saturation methods enhanced the trustworthiness and authenticity of the study.

To maximize the trustworthiness and authenticity of this study, the researcher used those methods consistent with the qualitative paradigm. Prior to each interview, the researcher provided an oral and written description of the purpose of the interview and the interview questions to each of the participants so that the focus of the study and the general focus of research questions remained consistent across participants. The researcher interviewed twenty two different women, which included most of the African American women in occupational therapy who satisfied the criteria for the study. In so doing, the both duplication and saturation of themes were achieved.

To achieve triangulation, the researcher reviewed articles, books, and videotapes published by the women. The researcher kept a journal of her impressions, observations, and additional remarks shared by the participants. She then compared the themes that

emerged from the publications of the women and her journals with those that emerged from the analysis of the tapes and biographical sketches. She also compared the themes with the current research published by African American female scholars.

The researcher obtained member checks by dialoguing after the interviews with each of the participants about their and her perceptions of the interview process and emerging themes. She sought feedback from each of the participants as to questions to include and interview techniques to employ to maximize the authenticity of the data being collected. She mailed a conference paper she drafted discussing the preliminary findings to each participant. She received written and verbal verification from a number of the participants that the draft of the preliminary findings accurately reflected the multiple aspects of their lives.

The researcher also sought expert consultation by sharing the preliminary findings at two national and one regional conference and by submitting a draft of the dissertation to several of the study participants with expertise in research. From these forums, the researcher again obtained confirmation that the findings accurately related to the lives of the participants and other African American female professionals.

As identified earlier, one additional issue related to racial differences between the participants and the researcher which had the potential of compromising the researcher's understanding of the issues, the types of questions pursued, and the types of responses received. To minimize this potential, the researcher reviewed major works by African American female scholars, read other oral history projects of African American women, and sought the advice of African American female colleagues to gain an understanding of

issues that informed the lives of African American women. The researcher addressed this question with the participants during the interview process to make explicit her purpose for engaging in the research. As well, the researcher encouraged the women at the beginning of the research process to contact other women who had participated in the research project to ascertain its merit, their risks, and the researcher's ability to appreciate the complexities of their stories. The researcher used minimum structured questions so that the stories of the women, rather than the research questions, directed the interview process. As identified earlier, the researcher submitted drafts of her analysis to selected participants for feedback regarding accuracy of interpretation.

Summary of the Chapter

This chapter restated that the purpose of the study was to understand the learning paths of African American women who held positions of prominence within a predominantly Caucasian, female profession. This chapter provided a description and rationale for the phenomenological based, oral history research design of the study, and a summary of the qualifications of the researcher to conduct this specific research. It clarified that a purposive sample of individuals identified primarily through a snowball selection technique participated in the study. The chapter outlined ethical considerations related to confidentiality and protection of human subjects. It described data collection methods consistent with oral history methodology and data analysis and verification procedures consistent with the qualitative paradigm.

The next chapter of this study, Chapter 4, presents the findings from the oral history interviews. Because the phenomenological focus of the study, the next chapter presents those findings in a descriptive, narrative form using, thick, rich descriptions from the transcriptions of the tapes. Chapter 5 interprets the findings within a post structural and Black feminist framework.

Chapter 4

RESEARCH FINDINGS

This chapter provides a summary of the findings from interviews with twenty two African American women who hold positions of prominence within the predominantly female, Caucasian profession of occupational therapy. It includes a group sketch of the women, and a collective account of their learning paths as revealed through their life stories. It ends with a synopsis of the perspectives about their leadership as influenced by their learning paths.

Group Sketch of the Women

This section presents an overview of the demographics, educational levels, family compositions, and leadership positions of the women who participated in this study. The goal of this section is to facilitate an understanding of the backgrounds from which the women came that led to the positions of prominence that they achieved. Because of the number of participants and the thick, rich descriptions they provided, this section highlights general patterns rather than reveal individual stories (See Appendixes C, D, and E for information about individual participants).

Demographics

The women were born between 1916 and 1961. Four were born between 1916 and 1929, eight were born between 1930 and 1939, seven were born between 1940 and 1949, and three were born between 1950 and 1961. As children, they lived in fourteen different states and presently reside in twelve different states. Seven of these states overlap both groupings. In addition, they have lived and worked in ten other states of the contiguous United States. Most of these twenty-nine states represent those that are located on or are near the borders of the United States with scattered representation from those that are located more centrally. To achieve such age and geographic representation was not an original intent of the research design but rather a result of the residency patterns of the participants.

Educational Levels

All of the women hold professional level certification in occupational therapy. The four oldest women plus one other woman earned post baccalaureate certification degrees in occupational therapy. The other seventeen women earned baccalaureate degrees in occupational therapy. All but the oldest woman also earned masters degrees in occupational therapy, or related fields of physical therapy, education, health care administration, music, home economics, ethics, rehabilitation, counseling, and recreational therapy. Two women are currently doctoral candidates, one in psychology

and one in health and social welfare policy. Six of the women hold doctoral degrees in the fields of education, sociology, neurology, kinesiology, and rehabilitation psychology. These six women represent all but two of the African American female occupational therapists who hold doctoral degrees in the United States.

Family Composition

The women grew up in various types of households. Sixteen of the women grew up in households where their biological mothers and fathers were the predominant adult figures. Two women grew up in homes where their step mothers and biological fathers were the predominant adult figures. In both of these situations, the women also lived with their grandmothers for a period of time. Three women lived in homes where their biological mother was the central adult person. One woman alternately lived with and was reared by her mother and maternal grandparents. In most of these households, other adults who were or were not biologically related also contributed to the family network.

Two women grew up as the only child, though cousins periodically lived with them. Ten women lived in homes with one other sibling. In all of these situations, this sibling was a sister. The other ten women grew up in households with two to seven other siblings. The placement of the women within their sibling ranks ranged from oldest to youngest.

The socioeconomic status of the childhood families of the women included working class poor through upper middle class and depended upon the work and careers available

to their primary caregivers. Four of the women lived in housing projects for a period of time as young children. Most of the women grew up in modest, working to middle class socioeconomic environments. Though one woman initially lived in a more privileged economic environment as a child, this changed as she entered adolescence because of the premature death of her father.

The parents or primary caregivers of the women worked as: domestics, factory laborers, truck driver, beauticians, transportation and service industry employees, teaching assistant, bookkeeper, postal workers, farmers, small business owners, tradesmen, disc jockey, educator, licensed practical nurses, counselor, social worker, minister, physician, and business consultant. While children, only five of the women had mothers/stepmothers whose primary occupation was that of a homemaker. Four of the mothers worked as domestics. Five of the fathers worked as postal workers. Of note is that six of the nine parents who worked as domestics or in the post office had attended or completed college. These areas of employment reflected those positions that were available to them because of their race rather than their educational levels.

The amount of formal education the parents received spanned from that of no formal to medical school education. Four of the primary female caregivers and five of the primary male caregivers either had not attended school or had only an elementary level education. Four of the mothers and six of the fathers attended or completed high school. Fifteen of the mothers and nine of the fathers attended or completed college. One mother also earned a master's degree and two fathers earned doctoral degrees. Six of the parents

who earned degrees in higher education did so after their daughters started or completed their own degrees in higher education.

All of the siblings of the women completed high school. More than half completed college. Some also completed masters and doctoral level degrees. They engaged in careers as tradesmen, therapists, librarians, educators, engineers, doctors, attorneys, models, and business owners. Seventeen of the women previously lived or currently reside with a spouse or partner. Five of these women lived with their spouse or partner most of their adult lives. Because of family and career obligations, three waited until they were older to enter into a relationship with a spouse or a partner. Divorce or premature death of the spouse impacted on the marital lives of the other women.

All of the spouses and partners attended or completed college. Four also earned post baccalaureate or master's degrees and six earned doctoral degrees. At the time of this study, they held professional careers as dentists, veterinarians, artists, business owners and consultant, ministers, and educators.

Thirteen of the women also were parents. At the time of this study, all of their adult children earned advanced degrees and practiced in such fields as social work, law, medicine, communications, library science, public health, education, and finance.

Positions of Prominence

Consistent with the focus of this study, all of the women currently held positions of prominence at regional, state, and national levels. Within these positions of

prominence they held leadership in academic, professional, health care, and community settings. Fifteen of the women served as academic program chairs; three of these women also served in deanship or associate deanship positions. Eight of them founded or were founding faculty of occupational therapy academic programs, three within historically Black universities. That so many of the women who participated in the study served as chairs of academic programs reflects the public recognition that such a position receives within the occupational therapy profession.

Many of the women also served as managers, chairs, and board members of commissions and committees at the national and state levels of the occupational therapy association. For example, at the national level they served as managers of the Ethics Program, the Multicultural Affairs Program, and the International Program. They functioned as chairs and board members in the national association, the Commission on Education, the Professional Program Directors Council, the American Occupational Therapy Foundation, the Research Advisory Committee, the Multicultural Task Force, the Professional and Technical Review Analysis Committee, and Reorganization Task Force. At the international level, they sat on the board of or provided consultation to the World Federation of Occupational Therapists. At least seven of the women were the founding members of the Black Occupational Therapy Caucus and three of them served as its president.

At the state level, they held positions as presidents of state and occupational therapy associations, and chairs of licensure boards, task forces, and special interest

committees. Within health care organizations, many assumed responsibility as directors or coordinators of rehabilitation programs.

All received awards of excellence or service awards at the state and national levels. Most received honors as Fellows of the American Occupational Therapy Association, Outstanding Women in America, Who's Who in America, or outstanding scholars. One individual holds the unique honor of being the first African American and first female to serve in the rank of Colonel and Chief of the Army Medical Specialist Corp. Another holds the unique honor as the recipient of the Slagle Lectureship Award, the American Occupational Therapy Foundation and the American Occupational Therapy Presidents' Award, and the American Occupational Therapy Award of Merit. This same individual has been asked to archive her works in the Texas Woman's University Blagg-Huey Library which is a repository of original works by notable women.

Beyond the scope of the occupational therapy profession, the women held positions as state, regional and national directors of programs for the Office of Civil Rights, The U.S. Army Surgeon General, United States Department of Health, Education and Welfare, United Cerebral Palsy, the National Society of Allied Health, the Comprehensive Health Planning Council, and Office of Vocational Rehabilitation. They were invited to sit on advisory committees and councils for the National Easter Seal Society, the National Institute on Disability and Rehabilitation Research, the Department of Health Resources Administration, State Medicaid Program, the Governor's Committee on Health Care Reform, the Governor's Commission on People with Disabilities, the Civil Justice Reform Act, and the Veterans Health Care System.

These women also assumed leadership responsibilities within their communities beyond their professional roles. They sat on the board of directors for community employment projects, well elderly housing initiatives, youth education programs, and ecumenical and civil rights movements. One served as the Torch Bearer in Minnesota for the World Olympics.

Summary of Group Sketch of the Women

The women who participated in the interview process were between thirty eight and eighty two years of age. They lived and worked in twenty-nine states of the United States. As children, they came from working class poor through middle class environments as reflected by the educational backgrounds and employment opportunities of their parents and caregivers. The educational levels of their parents ranged between that of no formal education and advanced levels of higher education. Most of their parents worked in service, trade, and factory jobs, with a few holding professional careers in education or medicine. In contrast, all of the women earned post baccalaureate degrees and held professional careers in health related fields. Similarly, all of their spouses, partners, and adult children attended or completed college with many holding professional careers in medicine, business, law, education, social work, and the ministry.

In addition to their educational and career achievements, the women advanced in their positions of prominence at the local, state, and national levels. Rather than assuming leadership responsibility in only one area, they assumed such responsibility in multiple

arenas within education, the occupational therapy profession, and the community after they entered the health care workforce. Rather than sporadic incidences, they demonstrated sustained leadership throughout their professional careers.

A review of this data indicates that the women, as a group, achieved higher levels of education, economic success, and career status than did their parents and caregivers. The question remains, however, as to how and why this occurred. Based on the oral descriptions of their life histories, the following section describes the learning paths these women followed, the barriers and supports they encountered, and the strategies they employed to achieve educational and professional prominence.

A Collective Account of the Learning Paths

This section describes the learning paths the women followed as revealed through their oral histories. The goal of this section is to illuminate the complexity and richness of these life-long learning paths. It is to emphasize the impact of the messages the women received on these paths, enabling them to assume and sustain the positions of prominence that were previously described.

The learning paths of the women are presented within the context of five themes that emerged from an analysis of thick, rich descriptions the women shared about their lives. The themes include: the family system, educational system, network system, personal system, and societal system. As revealed through the women's stories, the learning paths within each of these systems do not occur in isolation from but rather in

tandem with one another. Some of the learning paths transverse through several systems. This examination of the learning paths provides critical clues for understanding why the women assumed positions of prominence that advocated for the care and social justice of others.

At the end of this examination, the chapter shifts its focus to explore the leadership roles and styles that emerged from the learning paths. Such an exploration offers additional insight as to how the women internalized the leadership messages they received and demonstrated leadership skills they acquired within socially constructed systems of support and repression.

Learning Paths Within the Family System

Through their oral histories, the women described the influence of the family system on their learning paths. The family system included immediate and extended family units that were biologically and culturally determined. Through the interface of family-generated learning opportunities and expectations, the women developed a belief in their own capacities to excel academically and professionally. Through this same interface, they learned to create visions for themselves, develop self-discipline, attend to environmental cues, and engage in multiple learning opportunities. They learned how and internalized the obligation to assume leadership positions that attended to the needs of others.

Influence from Parents and Primary Caregivers on Learning Paths

The women shared that their parents and primary caregivers provided a wealth of directed learning opportunities and an atmosphere of high expectations. To do so, the parents and primary caregivers created environments that were safe, disciplined, and selective. They permeated their parent-child communications with explicit messages about the importance of education and implicit messages about the worth of their daughters.

> Now, you know, I'm 53 years old so when I was a little girl it was no small feat to go and find a Black doll. I mean, they weren't every place. I can remember [my mother] searching around and looking and looking and finding me these special dolls. They were always prettier than everybody else's, so everybody always loved my dolls. I still remember my Rita doll, it was such a beautiful doll. But she always had that kind of sense of importance of our heritage to her and that being important to me too....
>
> Another story I always told about her is that when I was a little girl I wanted to have a nurse's kit because all the kids had nurses' kits. Christmas was coming and I was begging for this nurse's kit. Well, Christmas morning came and I had a doctor's kit and it was black and it was a doctor's kit and I was just beside myself. I said, 'Why would you do this? Why would you give me a doctor's kit? Girls are not doctors. Girls are nurses.' Then she said, 'Oh no. You're going to be a doctor. If you want to be a doctor, you can be a doctor.' So then.... I was a doctor

> and I made everybody the nurse. I wanted the boys to be the nurses then. [She wanted me to have] this idea that whatever I wanted to do I should be able to do. (BT)
>
> They wanted us to be in an environment that was comfortable, safe. In some ways they were rather closed to the greater community because they didn't know if they were of the right type or something; but they were very open to those that were, in their estimation, of the right type, whatever that meant.... They were people, and I think it's a values thing, people who invested in their kids and kids who came from families that valued education... The kids who could just run wild in the street without ever reporting back home, were not good. Those were in the not good category. The kids who had families who looked out for them, who made sure they knew where they were, they knew what they were doing, those were in the good category. Yes, my mother paid special attention to that. (CH)
>
> We were very sheltered. It was not until I went away to graduate school that I had ever been away from home.... They saw that we had the exposure that really developed our own ego, our own self image. We knew, as they say now, we were somebody. We knew that we could go to them and talk with them about anything that bothered us. (NW)

Within these sheltered environments, some parents and primary caregivers actively supported the engagement of their daughters in multiple learning activities. A few parents were very restrictive, in an effort to protect their daughter from social injustices.

We were totally involved in the church and went to a lot of church activities. We were also involved in all the school activities.... Somehow [my mother] seemed to have a way of making it work out; we got whatever we needed. We were always told that we could do whatever we wanted, if it was something we were interested in. We were also involved in a lot of community activities. We did a lot of community things at the community center. It was just expected for us to do that. (SW)

When my sister and I were pledging the sorority, we went in at different times. Many times, because of the initiation and so forth, we were out late at night. [My father] was concerned about our safety so he would not only pick up us and take us home, but he would pick up all the others without transportation and take them home. Many of those sorority sisters today would say, 'You know your Dad was always there for us, too. He would come out. He would just say, where are you? I am coming to pick you up and whoever else does not have transportation.' He was always there.... He was very protective of us. Very, very protective. (MM)

[My father] very much was, I think, aware of the risk to all of us children, because he didn't want us to go with groups, social groups at school, going to football games. My brother was older, he was in junior high, before we left Montgomery. [My father] questioned very carefully who was going to be there and who he was going with. [He would] make sure who the family was he was riding with was someone he could trust and was going to get him back. Girls

> never got to do a thing. Girls stayed home.... Very rigid hours, comings and goings and bedtime telephone privileges, very strict disciplinarian.... I think he was very afraid about what was happening during that year, during the Civil Rights year because he could see trouble brewing.... He felt if you could maintain your own little isolated family, look as if you were following the rules and regulations you would be okay.... At the same time he helped us establish a rhythm of discipline that could be internalized for setting goals and getting work done and reaching for higher things. (JB)

The parents and primary caregivers expected their daughters to study hard, earn good grades, and attend college. Though parents usually did not articulate specific career goals, they did expect their daughters to use their education to help others. To ensure that their daughters received quality education, the parents made multiple compromises and sacrifices, such as working several jobs, changing communities, sending their daughters to live with relatives, and joining the religion of a religiously affiliated school. Many parents actively participated in school related activities to encourage their daughters.

> Another conversation had to do with getting an education. I remember when I was four years old [my mother] and I were making the beds and she said, 'When you go away to college.' So I didn't know that people didn't go away to college.... I knew that I would go away to college.... And then, because I was the girl, there was some message to me about, 'If I only have the opportunity to educate one child,' it would be me because she didn't want me in someone's kitchen. Now, when she graduated from college she couldn't get a job as a teacher

> because they weren't hiring Black women. So she had to work [in the kitchen]. (WS)
>
> My parents would often talk about having to work very hard to give us the opportunities that we had. They would say to us, 'When you have the opportunities, you're supposed to help other people. When you become educated, then you can become a leader in your community and you can help other people. That's your responsibility.' It was not implied; it was made explicit many times. 'That when you have something to give, you give it. When you have money, you share it. When you have food, you share it. When you have learned something, you share that with other people because not everybody has had the opportunity to go to school.' Whether that's lived out in teaching Sunday school or doing daycare work in the community or volunteering at the Y or whatever, you're supposed to use your education. (JB)

In addition to expectations about formal education, the parents and primary caregivers modeled for their daughters expectations to attend to the welfare of the community. The parents and primary caregivers did this through active engagement in the community, church, and schools. As a result, the women understood at an early age that it was their responsibility to care for people in the community by reading to those who were illiterate, delivering food to those who were frail, and tutoring siblings who had learning difficulties.

> I know that one of my jobs was to read for people in the neighborhoods when they received mail. It was, either, I had a time to go and read to them or they came

> to the house and would bring special things for me to read. So part of my job as a child was to read and respond. If it needed a letter I was to write the letter and have them sign the letter and I was to make sure it got mailed properly. (SJ)

Special Influences from Mothers on the Learning Paths

Beyond those that they received jointly from their mothers and fathers or male and female caregivers, the women also received special learning messages from their mothers. These messages influenced both the leadership roles the women assumed and the leadership characteristics they demonstrated as adults.

The women frequently described their mothers as beautiful, strong, loving, independent, and capable. They saw their mothers as having a strong desire and capacity to aid others. The mothers taught the women how to sew and cook, care for others, serve their church, and be social advocates. Their mothers served as Girl Scout leaders, school assistants, precinct captains, and church organizers, frequently in addition to working outside of the home. They modeled for the women a set of ethics regarding the value and rights of each person and demonstrated how to advocate through words and actions for social justice. They learned from their mothers how to develop a repertoire of people skills that enabled them to negotiate for community services.

> [My mother] was always involved with my sister and me in school. She was a volunteer in school, some of the breakfast programs, some of the arts and crafts programs. We had a field day which was a day off from school and many of the parents participated. I was quite proud because my mother was the Good Humor

Man or Good Humor Woman, I should say.... She was also a Girl Scout leader, and my sister was in her troop and went from Brownies to Girl Scouts....

One of the things that I do remember that was quite prideful, if I may say so, is that my mother always made our Halloween costumes from scratch and my sister and I always won the contest.... One year we were witches and she made the pointed hats and things; and one year we were tigers or leopards.... I can remember those costumes. Actually I can visually see them (PK).

My mother was very active in the PTA and the block club and the polls and she was very community oriented. Not a leader in the community but a worker. Very civic minded. Because she wanted to be a missionary, my mother would go down to 63rd and College Road and pass out religious [materials]. So I was always terribly embarrassed about that but she's a missionary, what can you say. She was not interested in the house. She had missionary work to do. There was community work. She would take care of the sick. She would go to people's houses who were sick. She would bathe them, that was her mission work. My mother is 98 and she will still take care of the old people. She does it to this day. There's a blind woman in her church and she says 'I have to sit next to her because I have to help her'. She can hardly walk. She's having a hard time walking, but that's her orientation. (WS)

My mother was very pretty, very, very capable, very ambitious in terms of getting ahead. She was not college trained.... She was a domestic, but she also took LPN classes and...was able to provide LPN services.... So she combined the

two, some domestic work with the LPN skills. She was a seamstress and I thought, I thought my mother could do anything. There wasn't anything, there was absolutely nothing that I didn't think my mother could not do if she wanted to do it.... I really admired her. She had a sweet, gentle spirit but she could get nasty when she wanted to. She was very caring for not only me but the family and anyone else that was a friend that she could help. She [would be driving] along the street and see probably another maid waiting for a bus and she'd pick them up and say 'Where are you going?' If it wasn't too far out of her way, she'd pick them and take them on. That's the kind of woman she was.... I think I struggled to please her because she was kind of a perfectionist. And I do remember some instances where I was afraid I wasn't quite measuring up. I was always looking at her face, because she had a very expressive face. She could look at me and I could know that I had done something not quite right or the way it should be. (ES)

My mother was active in the community and I never questioned how she ever found time to do all the things that she was doing.... Because the Civil Rights movement was rooted in the church, her activism emerged. The church really became the place where all the organizing happened. Where they would plan their strategies. Where they would figure out transportation. They would figure out child care for people who were attending one boycott or the other... She very much saw it as her responsibility to do what she needed to do as a member of the church to help the movement work. I think the activism for her was not political. It wasn't an act of revolt but an act of support for people who were trying to do

> the right thing, from a Christian point of view. That's how she would pose it.... I walked away with knowing there was power in organization (JB).

Special Influences from Fathers on the Learning Paths

The fathers of the women also had a significant influence on the learning paths of the women. Many of the women articulated that their fathers taught them how to think, negotiate, plan for the future, and persevere with a task to its completion. They learned from their fathers how to see the interconnection of things, to understand systems perspectives, and to dream about possibilities. They saw their fathers as civically minded, working to provide security for their immediate and extended families. Some of the women saw their fathers transcending the stereotypical male gender male role of provider to also serve as family and community nurturer. As the women had done with the messages learned from their mothers, they internalized the messages from their fathers and transmitted them to others through their leadership roles and styles.

> As I said, he was a brilliant person and his memory [was remarkable]. Through his vast readings and understanding, he wouldn't look at just trees, he could see the forest.... I would just listen and pick up so much, the way he talked and the way he saw things. I think that gave me a very broad perspective on many things. I just didn't limit myself, just thinking there's no limit, you know, the possibilities of so much more. Even though he himself felt limited in where he was stuck.... People would come for the mail and he would engage them. They were from all nationalities and then he would delve into more about their lives. He

knew so much. In fact, my grandfather was raised by a German family so [my father] spoke German. My father spoke a little bit of German... when he saw his German friends. He was a very interesting man.... When I was in high school, he would even introduce me to the stock market and how to invest. So I began investments in insurance plans.... He was practical but also very expansive in his thinking. (MM)

When we had to do stuff for biology in high school, [such as collecting] algae off the lake early in the morning, he had all of us in the car. We went and did that stuff.... He was always this approachable father. My vision of men kind of got a little distorted by him because I can remember being in school and asking a little boy to tie my sash and stuff because that is what dad did.…

He was always the inclusive person, the strong person, as far as I was concerned. There wasn't anything he couldn't do.... People see him as very wise …. I always say about him, he's always taken me to the most important changes in my life. He's the one who took me to grade school. He's the one that took me to the high school exam the first day. He's the one that took me to college, the undergraduate. He's the one that when I moved to Boston, he went there for the move.… He is my fall back position. Financially, if I need money he's always been there. I never ask, but he'll always say, 'Do you have enough money?'....

He didn't have the opportunities. I think part of my, 'I'm not going to take any stuff from people, particularly racist stuff,' comes from him… because of how

much he had to put up with.... Once the laws changed I could see that side of him. Very Afrocentric.

Also [he has] the ability to speak in plain English …. He's such a good listener. Then he takes it and translates it into really understandable terms that just captures whatever it is. I think in many ways, I probably got [that from him].... He says, he's got his Ph.D. from the streets, that's that life long thing. I'm appreciating that more about him now as an adult. (JL)

General Influence from Important Adults Within the Extended Family System on Learning Paths

In addition to their parents or primary caregivers, the adults in the extended childhood family units of the women assumed the right and responsibility to discipline, nurture, and educate them. Sometimes the extended family members lived in the childhood household of the women. Some of the extended family members were teachers or adult friends of their parents. The adults placed expectations on the girls to abide by established codes of conduct and to care for the extended family. They provided love, emotional support, and cultural and educational encouragement. Through their modeling, they taught care giving and leadership roles within and beyond the immediate family.

My mom had two older sisters and a brother that also lived in Dallas fairly close.... My aunts have actually told me that they felt it was part of their responsibility to help her take care of us. Both of them had only one or two

children of their own and my mom had the most....They just said it was part of the family [responsibility] (SW).

At that time, truly a community did raise a child. It really was very true. You were as concerned about what Mrs. Brown next door said or thought about your behavior and you were on your P's and Q's when you were in her presence as much as you were when you were in your parents' presence....

The neighborhood was... probably middle class, Black; although there were certainly working class people in the neighborhood as well. But, in terms of their values, they were middle class, so that is... a money separation.... The neighborhood was very concerned... and supportive.... I mean nobody could ever drive into that neighborhood and take someone away, it just couldn't happen at that time.... You really were aware of all of your neighbors as much as you were of your family and you were very concerned about their perceptions of your behavior as well as your parents (MS).

There were three rooms upstairs. Unc was in one of them; a woman named Miss Jackson was in the second room. She, too, was my very special friend. I had Unc and Miss Jackson and I'd flop in one room or flop in the other room and they loved me and I loved them. It was just a wonderful place to be... I'm talking about how important these people were. They weren't transient kinds of relationships. They were highly selective. My folks did a lot of interviewing with people who would go in these rooms. They became lifelong friends and valuable people in my life and [I] in their lives (CH).

> I remember as a young person, people would come to town and they couldn't stay in the White people's hotels so they would stay in our home. We would have important people that would stay in our home like a bishop or a professor or movie star. My parents would usually have a... little entertainment and have an evening with that person. I remember some of the discussions at that time. I could be in on them. I used to sit in that little chair there and listen to what was going on. It gave me a sense of whom I could be.... I remember one movie star that came, Louise Beavers, and she was in the First Imitation of Life that came out in the 30's. When she came, I was able to listen to her. I think she did a little singing and I remember thinking, here's somebody I see in the movies and that's wonderful. Since my father had been the registrar at Wilburforce University, a lot of the people that had gone there to school came through and I could see what they were doing. It didn't mean a whole lot to me at that point. But these were people who were upright citizens, that was just a part of the life that I knew at that time. (SM)

Messages from Parents and Caregivers for Coping with Racism

Parents and caregivers communicated different messages for coping with the racism that the women encountered along their learning paths. Some parents and caregivers did not discuss it, implying that it was a part of societal norms. Others reflected general awareness, but created living environments that protected the women from its direct stings. Other parents, while openly acknowledging its wrongfulness, taught

their daughters to formally abide by its rules and to figure out strategies for negotiating around it so that the family could remain physically safe and have a source of income. Some parents and caregivers talked about it carefully with other adults, in code, for fear of who may be listening. Still other parents and caregivers openly discussed racism, focusing on it at a personal rather than an institutional level. One parent could not protect her daughter from sustained, blatant racist acts of the larger community, but tried to construct a healing cocoon within the walls of the home (CC).

As children, most of the women understood that they were not to initiate discussions about racism with their parents because of the embarrassment and sense of powerlessness it perpetuated. However, all learned how to identify and address racism. By watching their parents and caregivers, the women learned to identify its subtle and blatant forms. They learned bicultural coping mechanisms, skills for living in two racial worlds and insight to know which set of skills to use. They understood that they were not to use racism as an explanation for nonperformance, but were to try harder, were to excel to be recognized as competent. In spite of racism, they were to succeed academically. They were to carry these skills with them as they assumed leadership responsibility for advancing social justice.

NW described her mother as having brown skin and her father as having White skin with only a few drops of Black blood in him.

> But my mother and father never spent a lot of time talking about it. We knew there was segregation. And see, the full impact of it never just engulfed us....

What really happened...Daddy... went down to... Union Station to get a job, porter or something, and they grabbed him twice out of the Black line and put him in the White line. So he stayed there. He didn't make a big deal out of it. When he finally got a job, I don't know whether they thought he was White or whether they didn't think he was White. But anyway, the people he worked with, gradually the Black people he worked with, finally found out that he was Black, was married to a Black woman, and had Black children. They just hung out with him and just didn't say anything about it at all. But I am sure it was mentally taxing on him. I'm sure. But he never showed it. He never, never showed it. And I know all during the summers when we were traveling, we just knew we would park there and he'd go in and get our food. We knew this. I think he may have been frightened when the first man realized that he had a Black family, but after the guy said, 'Man, forget it. You know, you have to do anything you can to take care of your family'....

I often wondered how my mother felt about it because I think I would have been very upset about somebody not really knowing....But whatever the stress it caused... there was no embarrassing exposure. (NW)

And I've always thought and I've talked to many Blacks about this, that in some ways I've had to have two... When I was growing up at least anyway, I had to have two different demeanors, one when I was in the Black community and one when I was in the White. And I think that probably was true at that time... Segregation was never held up as a... good thing, but they never [said] 'we must

militantly conquer this.' It was like, 'Okay, we're going to do whatever we think we have to do to eliminate the differences. And if you eliminate the differences, then perhaps there won't be any need for this'. (MS)

They talked about it on a personal and individual level rather than as a system. They would talk about mean and evil Mr. So and So, or Sheriff so and so.... Montgomery wasn't a very big place.... So they would also have personal contact with a lot of the people who were in leadership positions. They would talk about people as if they were not Christians. They had evil hearts and evil minds and that they didn't care and they weren't humanitarians.

My mother worked for several families who were philanthropists. She worked for a Jewish doctor whom she adored. As a matter of fact she named my youngest brother after him. She would tell us that you shouldn't think all White people are like this because they're not all like these evil people. But there are some evil White people; there are some evil Black people. That's how she would always talk about people to us. She would not say that the only good people in the world were Black people. She helped us understand that there was a lot of evil. That a lot of people wanted to do well on the backs of poor Black people. That's how we were led to understand why there was segregation. (JB)

I remember vividly, one time, when I was really sick. My father tried really hard to get Black practitioners, our dentist was Black. He was worried about me. He took me to the doctor. This doctor was a White doctor and he had separate waiting rooms for his Black patients and his White patients. We had to go through

the back door to get to this separate waiting room. I must have been about nine. I said, ‘Why do we have to sit back here? It’s not right.’ I said, ‘They’re not more sick than I am, it’s just not fair.’ He said, ‘Well life isn’t always fair, it’s not always fair. Don’t think that life is ever going to be always fair. What you have to do is make the best of what you’ve got and look beyond what you think is unfair and hope that things will improve.’ Now, mother would have said, ‘And work to make them better’.... I was so angry, I said, ‘I don’t really want to be here, I’d rather be sick’. He said, ‘No, we’re going to sit here’ and we sat and we saw the doctor. I can remember feeling angry and I can remember feeling humiliated. I can now know that his selection of doctors was to protect us from those feelings, because most of the practitioners [we saw] were Black doctors. (JB)

She had a tough time explaining to me about Emmett Till, who was about my age. I think that’s when race first hit.... That was when I really found out how far hatred could go. As I was integrating the school, this thing about making sure you do your best, that was planted; not that I was representing my race, but there was a standard for myself and an expectation for us to do well, for me to do well. It came easy for me to do that. But the racial stuff, it was very hard to explain that.... I think what it was their powerlessness. To get into that, they’d have to admit their powerlessness. I can remember [my mother] being on the phone talking to my aunt and they were talking about crosses being burned and they had to be careful, they were talking in code. I can remember her explaining that to me that someone could be on the line and there could be retribution, so race was discussed but it

was discussed indirectly. (JL)

When we went south, we would travel [at night]. I didn't understand that by traveling at night you were less in danger.... When we stopped for coffee or the bathroom, we always had to go into the filthiest places.... For my father to respond, that was just terrible to have your child asking you about this demeaning thing. 'Why did you have to do that?'... They would shield me so I wouldn't have to see this direct White and Black interaction, so I wouldn't see them shamed, but I knew that we always had to go to a certain place. (JL)

The last topic had to do with race and what Black people have to do to elevate themselves. There was a whole bunch of what we have to do and what they won't let us do.... The statement was prepare yourself. (WS)

Continuation of the Messages Learned as Adult Family Members

As the women transitioned into adulthood and established adult roles within their families, they sustained their capacity to receive messages from their families. As well, they assumed the responsibility to share the messages they had learned and to generate new learning paths for their birth families and the children they were procreating. They created safety zones for their children or younger siblings, nieces, and nephews. They modeled and gave explicit messages to the children about the value of education, perpetuating the belief that the children could excel. They cared for the aging members of their family and community. The welfare of the family became paramount.

We wanted [our daughter] to be able to deal with the discrimination, to

recognize that it still exists, that it still exists today. But [we wanted her] to be able to deal with it in a way that is positive, that was not going to diminish her, that was not going to limit her in any ways that she could control. So those were life lessons that she learned as object lessons by experience.... She was called names and I taught her what to do to protect herself. I never thought I would teach my child to call other children names but I did. And it stopped. (LL)

I know when he was in the kindergarten he came home one day and he told me, 'Tommy Barr called me a nigger today [so] I told him, you must be confused. You must think that all Black people are niggers but anybody can be a nigger, even you'…. After that I figured he's all right. He had friends throughout that school. I let him spend the night one night with somebody from out there. But they could spend the night here, which they did. I took kids different places. They'd take a school bus, three or four of the little boys would get off here and then we'd go ice skating or something like that.…

When he got into junior high school I found there were some problems. He was not a goody two shoes at all. He got in trouble and I was willing to admit that. But I had to let them know, when he gets in trouble, or when he's in a group and they're doing something wrong, he's easy to identify. I told them I wanted them to make just as much effort to identify the other people as him because he's the only Black one in that group....

He [became] quite belligerent at one point in junior high school. What we did each day, is before we would leave, we would have a prayer. I found that this

> prayer was not only communicating to God, but to each other what concerns we had for the day. Because I was going to work and I had to worry about the traffic and I had to worry about whether I did my job right and that kind of thing. Then, he could tell me what kinds of situations he was going to have and that he needed help with from the Lord. Every morning we'd do that by the door before we'd leave. If I would forget he would hang back …. I would be reminded that we hadn't had our prayer, and things turned around. So I guess that communication helped with the whole thing. (SM)

In order to create learning paths for their children and attend to the welfare of their parents and the community, women sought partners who held similar values and aspirations. They sought partners who were their equal, who felt neither the need to dominate them or be dominated by them, and who respected their capacity as talented women, committed to educational pursuits and the social welfare of the community. Some of the women were able to find such lifelong partners. Other women found such partners later in life or remained single. Others experienced turmoil or divorce in such relationships.

> It's clear that it's very difficult for many African American women to find mates if they're interested in finding a mate who has comparable education and background.... But for us, one of the things that I guess I had thought and decided early on in our relationship was that was something that was controllable and we would try to keep that equal.... So that when we were first married, Joe went back to school after having come back from Korea, and completed his

> bachelor's degree and then completed his master's degree, mostly in summers. Because he was teaching, he had the summers available. He finished that degree. Then when it came to the doctorate, which obviously I needed to make my way in academia, I really was reluctant to do it without him also getting into a doctoral program. (LL)

Summary of Learning Paths Within the Family System

Through their oral histories, the women articulated how their family systems influenced their learning paths. For the women, their family systems included immediate and extended family units that were biologically and culturally determined. These family units created lifelong safety zones where the women were able to develop personal and racial self esteem. They generated dreams about the women's capacities as well as expectations to excel in school, at work, and in the community. They demonstrated how to think, care for others, and advocate for the social welfare. They planted seeds of expectation regarding leadership responsibilities. They modeled for the women strategies for coping with rather than being dominated by racism.

As the women transitioned from childhood to adulthood, they shifted their role within the family. In these new roles, they forged the learning paths for younger members of their families. As did their extended families, the women created safety zones for younger members to grow and develop positive concepts of self. They mentored how to think, become independent accomplished adults, and cope with racism.

Learning Paths Within the Educational System

Through their life stories, the women described their learning paths within the formal education system of schools and universities and the less formal educational system of the church, community, and workplace. These formal and less formal educational systems included structured and non-structured, planned and non-planned personal and professional growth opportunities. They were not independent from but paralleled and overlapped those within the family system. As had occurred within the family system, the women learned through the educational system to assume leadership responsibility and develop leadership skills that served the needs of others. However, in contrast to the consistent messages the women received from their family systems regarding personal capacity, academic talent, and leadership potential, some women received conflicting messages from their educational systems.

Learning Paths Within the Formal Education System

Formal learning paths connected elementary, high school, university and professional education experiences with one another. These learning paths furnished the knowledge base and credentials for assuming professional careers and subsequent leadership roles. Opportunities and barriers, supports and negations at each level affected

access and success at subsequent levels. Parental beliefs about the value of education and their daughters' capacities to excel fueled the will of the women to succeed within the educational systems, particularly when the women met with resistance.

Elementary and High School. Many of the women identified a key person within their elementary or high school, such as an art, science, or classroom teacher, who celebrated their academic capacity and stimulated dreams about future options. Some of the women were viewed as talented students within segregated Black schools. Others were viewed as the talented Black student in a predominantly White or multicultural school. Several achieved such honors as city wide science honor student, class valedictorian, and president of class clubs.

> The Black Elks, had oratorical contests in which they gave scholarships. Well, we didn't have any money so I said I have got to try to get a scholarship. The teachers, particularly my English teacher, encouraged me to go in for oratory. So, I did. I participated in that oratorical contest and I won the local contest and went to the state contest, but I didn't win. But it was the experiences that I had and the self confidence that had been built up in me through the different roles that I had in this grammar school. (RB)

> And there were two neighborhood schools and I would say the majority of the African American children, the majority of the Jewish children, and the majority of the lower income Whites went to that school. Plus it had a special education room for children who were physically disabled. I cannot say anything about their level of intelligence because we only saw them during the special assemblies and

> so forth. We could see that they had physical disabilities. I mention this because I think that this mixture of people, a very heterogeneous mixture of people for K-7 had an influence on all of our lives in terms of socialization, looking at the world in general, and being involved with people who had different backgrounds, lifestyles, etc....
>
> I participated in many of the extra curricular activities as well as the regular activities. I think that through that type of thing my leadership came early.... I'm the older child in the family, so I had a tendency, as a child, to take over. And I was not shy. At an early age I knew that I was a queen! (ML)

Some of the women who attended segregated Black elementary and/or high schools had limited access to educational materials, typically those that were discarded from the White schools. In spite of this resource disparity, they were pushed by their teachers to excel so that they would be prepared to enter White educational institutions and communities. In addition to the standard educational curriculum, they learned about Black history and developed pride in their heritage. Codes of discipline were enforced. Teachers often were friends of the women's parents and openly communicated with them about academic and behavioral issues.

> I started to school at a school called Holy Name of Mary, which was run by the Sisters of Providence. The sisters are a Black order of nuns with the mother house in Baltimore, MD.... I used to think that the nuns just all wanted to be together. The Black nuns. I didn't realize that they were in that order because the other orders were segregated. The White nuns wouldn't allow them to be in their

> orders, so they had formed their own orders. Once again, it was actually kind of a haven to go there because it was an all Black.... well, actually it wasn't all Black. There were two White kids at our school. It was kind of a haven because there were lots of smart Black kids again and it was a wonderful place to be. It was a very pretty place. The nuns thought there was nothing you couldn't do. I really think that the attitude that the nuns had, which was very similar to my mother's attitude, really; was not only that you're good but you're actually better. 'You know you're better for a lot of reasons. Because you come from an ancestry that's been able to survive all these things we've had to survive. You're bright, you're strong.' The message was, 'You're way better.' They were relentless. I mean, they worked us to death and by the time we got to high school we were head and shoulders above everybody else. We were so far ahead it wasn't even funny. (BT)

One woman who attended a racially and ethnically integrated school "grew up woefully oblivious to racial epithets" (PK). However, most of the others who attended predominantly White schools experienced periodic, subtle acts of racial discrimination. As young children, they may not have been able to label such acts as forms of discrimination. However, they knew at some level that they were unjust. As one woman stated, "We knew, so prepared ourselves" by looks, stares, and ignoring (MM).

> For instance, let me tell you about my first day in my new school. I went to this new school and I always loved school.... So I'd always get a new dress, new shoes, and stuff and I couldn't wait to go to the first day of school.... So I go to

this new school now I'm really happy and I get to the classroom. I see this teacher and I walk up to her and she has her head down and she looks up at me, and kind of scowls at me, and looks back down and keeps doing what she's doing. I just stood there and stood there and stood there. Then finally she looks up at me and she says, 'So, you're Barbara Graves?...Well, I want you to know that you would never have gotten these grades if you had been in our class, if you had been in our school. Now, you go sit down.'.... That was my welcome and I guarantee you it was down hill from then.... I can remember that she would ask a question, if I had my hand up, she would never call on me. If I didn't have my hand up, she would always call on me. That was the year I started to get sick... 'Oh, I've got a stomachache I can't go to school'. (BT)

You see, in Atlantic City they had one high school and so the students from the segregated elementary schools all met in high school.... When it came time to pick out the courses in our orientation, whether we would take a scientific course or classical course or technical course or what not,... some of the teachers, one or two of them particularly I remember, encouraging most of the Blacks to go into technical courses. 'Don't take the classical courses, you aren't going' [to college].... Many of the [Black] students were encouraged to go to the vocational schools that we had in the city... to become electrician or plumber or so forth, which is all right because some of them have done very, very well....

That was one of the things that hit me. I had piano lessons and I had violin lessons. I wanted to play in the orchestra and I wasn't selected to play. I wasn't

> sure whether it was because of lack of talent. But it did hit me, when it came time to play sports... I went out for basketball and I went out for field hockey, all that sort of thing. I did well in basketball. As long as you can do well and win for the team, [you can play]. (RB)
>
> One of the major racial events [occurred] was when I was a senior. I was in the drama society....so, of course, I tried out for senior play. Lynn, my best friend, tried out for the senior play and actually lots of the other Black students [tried out].... Lynn and I were the two top Black students in the school... and we got one of the major roles. Each of us, each one of us got the role of maid in the senior play. Hmm. We confronted the authorities. Isn't this interesting that the two Black students get the role of maid? The maid didn't even have a name. The maid was called 'maid'. It's the kind of thing that you'd like to go back today and really talk more because, at the time, the reaction was not able to be articulated well enough. But we knew something was wrong with this. We knew. This is not accidental. This is not coincidental. The words stereotyping and typecasting were not used, but this is wrong.... That was one of those reality things. Wow. This is all because I'm Black. (CH)

Several of the families needed to advocate for the academic placement of their daughters. They needed to defend their daughters against societal assumptions that Black students were not as academically capable as White students and that Black students should be tracked in vocational rather than academic programs. A few of the women

needed to field charges from other Black high school students that they were trying to become White by succeeding academically.

> So my mother went and talked to the superintendent and nothing happened. And I remember her saying 'I have to go down to the Board of Education and perform'.... My mother was a very peaceful, strong, sort of sunny, proper person but she could let it all hang out... So we went into this one office, I vaguely remember... my mother... screaming and shouting, banging on the desk. Then we went to another office and she did the same performance and then we went into... the bathroom and she said, 'I think you better participate in this, I'm getting tired of screaming so you better help.' I said... 'I don't know what you're doing, why are we here screaming and shouting?' She said, 'Do you want to go to college?' I said, 'Of course.' She said 'Then you have to go to an academic high school'.... 'Well how do you think you're going to get there?' I said, 'Oh, is that what this is about?' She said, 'Yes'.... [Later, my mother's friend explained] 'Do you understand about racism and all that?...You know you have to fight it. You have to use all kinds of weapons. Sometimes it's screaming, sometimes it's shouting, some times you have to play meek; you have to get the job done.' (WE)

Though most of the women experienced episodic incidents of racism, one experienced multiple, ongoing acts of discrimination within and outside of the elementary classroom, negatively affecting academic placement, social participation, and attention to her physical safety. She and her brother were two

> of the three Black students within an exclusively White school and one of only a few Black families within the community CC).

College and University. Most of the women shared that they discovered the field of occupational therapy accidently, rather than through formal counseling in high school or exposure to it through their parents. They learned about it through reading college bulletins, observing other college students in the program, exposure at work, or through conversations with family friends. They were attracted to it because it blended together their interest in arts, humanities, science, and health. It prepared them to care for others and address issues of social welfare through active engagement in daily life and creative tasks. Though not explicitly identified by the women, their stories revealed that it enabled them to develop a set of holistic thinking patterns.

> Wayne State was a school that they had a lot of non-traditional students so they had a lot of students who lived in the city but went to school [there]. I'm not sure of how we found Wayne. I think it was through a friend of my dad's who was a nurse. She knew I was interested in nursing, so she had recommended that I really go to college and not go though a hospital nursing program. She had really recommended Wayne State University. So I went to Wayne State in the nursing program. There was a girl who lived in my dorm who was in OT and we would sit and talk some times. She recommended that I look into getting into the occupational therapy program, so that's how I came to hear about occupational therapy and get interested in it....

I was really aware of that fact [that it was not very common for women to go on to college at that time]. In high school they reminded you of that consistently. Women period and Black women, certainly not.... They thought they were being helpful to advise you to go into something where you might be able to get a job. Yes, I was really very much aware of that fact, but it was something that I always wanted to do. I knew that I was going to have to work when I went there. As I say, instead of having to work cleaning somebody's house or something like that, to earn extra money, that I was able to get a job on campus. I really feel really blessed about that and was able to get a loan to finance my education. Then to be able to really participate in college, so I really enjoyed the days being there. (BS)

[My mother] wanted me to be a teacher when I first entered college and I found occupational therapy. It was a wonderful field for me. First of all, I saw these girls who were OTs and they had painted furniture in their room. For some reason that appealed to me. They were not cheerleader types, I guess they had a mission in some way …. They were always involved in these activities and they always seemed to know what they were doing.... They had a way about them that I really liked ….

I was an upper sophomore without a major. I thought, I have all these brothers coming so I better get out. So I took this battery of tests and one of the things that it pointed to was occupational therapy…. I didn't know what that was... but it seemed great. Another thing that also happened was, I took piano lessons from the time I was six until I was 17, we all took music. We all took art

> lessons at the Art Institute of Chicago. We all took dramatic art, see we were going to be something no matter what.... [Occupational therapy] allowed me to combine art with whatever else. Also, it was medical and psychiatric …. I felt it was just exactly right. I wanted to take all that medical stuff. [I had a family member who I thought was crazy and I wanted to know how to care for her]. I loved the fact, not the act of dissecting or working with a cadaver, but the fact that we did, so I had this knowledge about the human body that was really important to me. So just about everything we did as OTs I really loved. (WS)

Fourteen of the women were the only African American student in the occupational therapy program at the various colleges and universities they attended; eight of the women had a few other classmates who came from African American backgrounds. Fewer stories of discrimination were shared by those students who were only one of a few African American students at a predominantly White university. More stories of discrimination were shared by those women who attended predominantly White universities who had a greater number of Black students. It is questioned whether this difference reflected the perceived threat that White institutions felt as the number of Black students increased or variances among the cultures of the universities.

> When I went to the University of Iowa,... I was allowed to live in the dormitory but we didn't have White roommates and so if there were an uneven number of Black girls one had a room by herself.... I remember one of the White girls walking past one of the Black girls' rooms and she said, "Can I [be your roommate]?" And the University wouldn't do it at the time. (ML)

> There was only a handful of Black folks there so we weren't a threat. The darker the terrain gets the more threatening it gets. [There was] only a handful of us and we all came from the same kinds of families that I did, very articulate, high goal oriented families. (KB)

Within the universities and occupational therapy programs, some of the women felt welcomed and supported by their Caucasian classmates. Others felt that they were included within the formal academic setting but not in the informal learning or social networks. Similarly, faculty support varied. Some of the women received strong guidance from faculty. Through such relationships, the women received encouragement to hold local and national student office positions and were introduced to national leaders in the field. Through such exposure the women learned and developed leadership skills that they used later in their professional careers.

> I guess there's probably maybe about eleven of us in that class. I was the only Black.... Miss Willard was the director and Miss Spackman was one of the instructors. It was really a wonderful experience and I still have friends from that class. We still get together occasionally. We studied together and we did social things together. I can remember going to the theater to see Harry Bellafonte. We were there with a group. It was really good. It just was a good experience. (ES)

> I was president of the student committee, the OT association. It wasn't called ASCOTA then, it was just called The Student Committee. I was elected at the New York conference.... Florence Cromwell was president and Florence was a wonderful person to have as president and be in the student chair, because she

> really was very supportive of all things that we were trying to do.... Another person that was a quiet support, but I think the students in my couple of years really appreciated, was Wilma West, who mysteriously appeared at different places when we were eating and mysteriously enough, our bills were paid for, our dinners or lunches or whatever. Knowing students being on a shoestring, the woman had never said to us directly, 'I'll pay for your meals,' but there was an acknowledgment by the students that we had some benefactor, and she had to be the benefactor. (PK)
>
> I was between summer break one year and I got a call at home from Cordelia Myers, and Cordelia Myers was the editor of AJOT. She said, 'I have this great idea for a column. I want students to write it. What shall we call it?' We bantered around a couple of ideas. I think she actually came up with the idea of Students Speak. I wrote a column about student issues. I actually pulled it not too long ago, because I was surprised to see that I had actually written about cultural diversity, the title we use today, as well as ethics, what I do today. (PK)

Other women received the double bladed message that they were in the program because "we need your kind of people" (CH). Some experienced race-related grade discrimination. They learned that they needed to excel beyond the White students to be perceived as competent. They learned to be cautious so as not to create opportunities for faculty to fail them from the university. If they received a grade of A, the message was that they were a "smart Black student," an exception to what most Black students could

do; if they received a grade of C, the message was they were "just a Black student," performing at the level of mastery typical for Black students (CH).

Regardless of the level of support or negation they received, the desire of the women to learn fueled their pursuit of higher education. They understood that they must be successful academically to fulfill their obligations to lead and give back to others. They saw their role as opening the doors for education and health care services in occupational therapy for other African Americans.

> Part of that, too, for me was once again, putting me back in the environment where you were the only Black. Most of my classes, especially the freshmen year, I mean, maybe from a class of possibly 200 people, you look in the room. 'Okay, there's nobody here but me again'... Trying to adjust with that, coming from a totally Black environment to a totally White environment, was really much more difficult than what I wanted to realize... and it showed up very well in my grades. I remember the grades went home at the end of that first semester and I didn't get them. I got this wonderful phone call from my Mom, saying, 'Got your grades in the mail today. What are you doing?...You know you are now on scholastic probation.' I thought, 'Holy cow.' She said, 'I'm just trying to figure out what the problem is.' I explained to Mom it was just more of an adjustment than what I realized. I said, 'You know, you'd be amazed at some of the questions and the stuff that we get even from the girls in the dorm. So you swear they've never been around Black folks before. They do things differently.... you hear this, Mom, every day, all the time, everywhere you go.... There's no break from this other than

> when I come home.' So she said, 'Well, I'm not going to tell you, you know, you have to stay. The choice is yours but just remember why you're there. It's not for them. It's for you to get an education.' (SW)

Learning Paths within the Educational System of the Church, Community, and Workplace

Beyond the scope of the formal educational system, the women also followed learning paths within their churches, communities, and workplaces. Similar to the messages from their families, predominantly Black churches, communities, and workplaces communicated to the women that they were both capable and expected to learn; they were both capable and expected to assume leadership positions that advocated for and attended to the needs of others. Similar to the messages from their formal educational systems, predominantly White communities and workplaces transmitted conflicting messages of learning potential and limitations, of leadership validation and negation.

The Church. For many, the Church served as a place to develop not only their sense of spirituality but also their leadership capacities. It afforded opportunities for social and cultural development, particularly when such opportunities were not extended to the women through the school system.

> Automa was rural and even though there were only 33,000 people, there were about 300 Black people. About 140 of the people belonged to the Second Baptist

Church and the other 140 belonged to the Mt. Zion AME Church, of which I was a member. Then there was a scattering of folks who were either unchurched or Catholic.... The church family was a neighborhood for me because I even taught Sunday School at a very early age and I was an usher. Later on when I returned to Automa to work as an occupational therapist, I was a member of the Steward Board which was the board that received all the funds and disbursed them and was in charge of the spiritual aspects of the church. So, the church family was a very important part of our socialization. (ML)

My grandmother was Baptist. She taught Sunday School. Right up until she died she taught Bible Study. I attended the Baptist church, Shiloh Baptist Church. "Read my pieces." If you've ever heard Ophrah Winfrey talk about having to memorize pieces to say at church. It is poetry or scripture but mostly mine was poetry. Longfellow was one of my grandmother's favorites. That was one of the poets that I had to learn and recite. So that's kind of a flavor of that part of the community where I lived. (LL)

We started this club and we would meet at this Baptist church most times or sometimes we'd meet in each other's home…. A lot of us are still in touch with each other and are still friends, just like we were then. A lot of activities were around the churches. We would go to this Baptist church, it was Hartford Baptist, and they had a Baptist Youth program. We'd go there on Sunday afternoons. The Episcopal Church had Page Hall and they would have dances there on Friday

nights, so we could go to that. Then there might be skating parties or we could go on the East Side to the Forest Club....

. I feel that I was able to be the kind of therapist that I was, because, I don't know if God was working through me but he was certainly working for me. That's, I guess, throughout my whole life, all facets of my life.... I'm getting to where I enjoy going to church again. For years I didn't go to church, but I'm going again and I enjoy the music and I enjoy the message. I'm trying to decide now which kind of group I can work best with. Whether it's through stewardship or missionary work or, I'd like to get back with one of the choirs. (SM)

One way that I think I've coped is by being an activist.... I remember participating with a march at some eating place on the campus or demonstration because they didn't serve Black people... I have coped by setting my goals and saying, 'Well this is really where I want to go. This is really what I want and the rest of the stuff can just sit there, I'm not going to deal with it'. I don't think I've silenced my spirit. I think that's why I've always used the support of the church or church-like groups or things like that for nourishing the spirit. (SI)

The Community. Depending upon their value system and societal norms, some communities created opportunities for learning; others erected barriers to it. Those communities that provided such opportunities did so in a manner that supported the efforts of the Church and the family members of the women.

It was a great neighborhood.... I had my first business there. My very first

business when I was eight years old, probably seven, maybe seven, was that I had a popcorn stand. We lived maybe three blocks from White Sox Park and the men would pass where I lived to go to the Park when they left that factory. I remember that my mother would make the popcorn. She showed me how to make these little cones, and I would sell them to the men when they came by. So that was my first business.

I had my second business there too, which was I organized all the kids in the neighborhood to have a talent show and a play and then we charged all our parents and our sisters and brothers to come to see it. I kept half the money! The other half I passed out to the other members of the play. I have such really good memories. (BT)

We would go to the Lucy Thurman Y. You could swim and they would have parties and clubs and programs. They used to sponsor older boys' and girls' conferences, and again we were able to meet other people from all over the city and develop some leadership roles with that. They would teach us about finding jobs and how to apply and what to do about it. They would talk about dating some times. They'd have speakers come in on various professions and then there would always be a party at the end of that. (SM)

The women also learned that they could not access all community settings. Some of the women grew up in formally segregated communities, demarcated by established boundaries and separate resources available for Black and White citizens. Others grew up in formally integrated communities that were informally segregated to varying degrees.

These communities provided a mixture of racially integrated and segregated resources. The women learned to read those blatant and subtle messages which informed them as to whether they were welcomed or shunned because of the color of their skin.

> We lived on a street that was exactly one block within a mixed neighborhood. We were about the fifth or sixth Black family to move in. And I played with everybody in the neighborhood. The White parents had difficulties with having a Black child to their home. There was one particular family that wouldn't let me into its home, except in the vestibule. For the kids it wasn't even an issue once we got away from the parents. I also had difficulty with some of the Black kids because my family was all very fair and we had more money than they did …. My parents were what you call old Detroiters. They were there from the beginning, so to speak. So my parents were clearly very snooty, especially my mother, which is typical for her era. She was an exact replica of the environment that she was raised in. She really didn't even want me playing with the other Black kids or have them in my house. That was much more difficult for me than was the [issue with the] White families. Not being able to have my own in my house proved to be very traumatic for me over and over and over again because it made me different on all sides. I had to fight some times....
>
> I enjoyed my neighborhood, for the most part. We lived next to an apartment building that was owned by an Italian family. I kind of felt that I grew up with Italians and learned a lot about their culture and their food…. [They] used to let my sister and me come in and stay in the store and go back in the meat area. We

> were in the people's apartments, the families. It was all his family that was renting the apartments so we knew everybody in there. They'd holler for Pat and me to come over for dinner. There was something secure about that. That's the neighborhood. It was a mixed neighborhood, an integrated neighborhood, a multi-cultural neighborhood. (KB)

The Workplace. Within the workplace, the women sought learning opportunities that sustained their lifelong commitment to education. Through attending workshops, presenting at conferences, serving on national and local committees, participating in study and research groups, and enrolling in advanced professional studies, they seasoned their reasoning capacities and developed their leadership skills. They saw learning as a way to succeed and to fulfill their leadership responsibility to the community. As had occurred within the communities, the women received conflicting messages. Some messages were affirming, others were negating. The women had to learn which messages to accept, which to confront, and which to ignore. Through the messages that were affirming, the women received encouragement and guidance. The women were introduced to leaders within and outside of the profession. They received scholarships, national awards, and honors for their efforts. They were mentored to follow scholarly pursuits and assume leadership roles.

> Another thing that I think back about, is that when I started practicing, early on I was tapped to be on the committee to find a new home for AOTA. I was the young person. I thought of myself as the minority because I represented the young

therapists who didn't have money versus a person of color. Willie West was on the committee; Carlotta Welles was on the committee; Dean Tyndall was on the committee; a lot of older therapists that had been around that were wise in the ways of finance and real estate. I learned a lot on that committee (PK)

I was chief of the clinic. I was there for a very short time. When I was in Germany, they asked if I would like to go for my Ph.D. and I said, no. Jokingly I said, 'My next degree is going to be Mrs.'.... Then I got another call from the Surgeon General's Office. 'We are considering you for the Army Baylor class.' That's a very sought after class. In terms of the Army Medical Department and the AMFC, particularly, we only have one slot in that class. Very competitive among the six corps because it was a ticket... for promotion and advancement. It was one of the main ones for docs and dentists. They asked me if I wanted to go. I saw the handwriting on the wall, like 'Eloise you cannot turn this down, because it's not just a casual thing. You know they're trying to be nice to you.' I'll tell you the truth, I was ready for them to forget me at San Francisco, because that was my favorite spot in the whole world and I was ready to stay there. So I was only there about nine months and in that nine months I was selected to go to that class.... My husband proposed to me and we were off to Texas.

It was a class that was held at the Army base and so we had instructors from there and from the military and it was a very, very intensive class. Military graduate classes are not like anywhere else you've known, that you can have a class in the evening or a class tomorrow morning. We were in class from 7:25

> until four, five days a week. Jillions of papers.... It was an intense, military class. I was there, a new bride with a new husband. One of the things they told us that class separated the chaff from the wheat in marriages sometimes....It was a very good class and now you talk about broadening your perspective in terms of healthcare organization, management, and the big picture. It was just really something. (ES)

In contrast to this kind of support, the women also indicated that they confronted barriers. The frequency and intensity of these barriers differed among the women. Some women shared that they served as the token representative on boards and committees. If another African American was present at such meetings, those women needed to deliberate whether to sit next that person because of the overtly and covertly expressed concerns it generated among the non-African American members. “There were professionally lots of times when you know you were being put forward because they needed the photo opportunity. ‘Yes, we have minority faculty.’ No you don’t. You really don’t” (CH).

Some of the women experienced racial and gender discrimination in the hiring and promotion process. One met with resistance when she tried to form a committee comprised exclusively of African Americans within a predominantly White organization (JL). All of the women articulated that they bore the responsibility of enlightening members of the dominant culture about every day acts of discrimination.

> So we just understood all these things and lived within the system and tried to change the system wherever it could be changed quietly because it was more

> custom than law. There were some lawsuits and things, and job discriminations and hiring practices and what have you. But these things we just gradually understood and can still understand when we run into it in terms of how people are treated. (ML)

Summary of Learning Paths Within Formal and Other Educational Systems

Formal and other educational systems within the church, community, and workplace influenced the learning paths of the women. Within these educational systems, the women benefitted from the support of someone who believed in their cognitive capacities and promoted their leadership talents. Through these supports, the women developed a sense of self worth and belief in their capacities. Success in formal institutions of education created opportunities for scholarships and professional advancement. Beyond the bounds of formal institutions of educations, family, church, and community served as the major avenues for learning the skills necessary to be members of society rather than those needed for professional job tasks.

Most of the women discovered the field of occupational therapy by chance, attracted to it because of its blended focus on arts, humanities, science, and health. In occupational therapy school and work, often they were the only African American; thus, they created learning and support networks with other African American women outside of occupational therapy.

Within the formal and other educational environments, the women experienced varying degrees of discrimination. For some of the women, issues of racism within these

educational systems were not blatant. Others needed an advocate to prevent them from being tracked into non-academic programs and stereotypical jobs for Black women. As they had from their families, the women learned to recognize and develop skills for coping with and resisting such violations.

Regardless of the level of discrimination within each of these educational systems, the women understood that their academic success or failure reflected the success or failure of the Black race. Thus, they understood that they needed to succeed academically and professionally. Furthermore, they learned that to succeed meant to excel, if they wished to be perceived as competent by those in the dominant culture.

Learning Paths within the Network System

A web of networks that extended from the family units, church, community, educational institutions, and professional associations to which the women belonged, generated additional learning paths. Comprised of people they met through members of the family and educational systems, these networks expanded the opportunities and expectations for the women to learn and assume leadership roles. They allowed the women to engage in multiple cultural and social learning options, develop pride in their heritage, and gain personal strength. They prepared the women to navigate through the institutions of the dominant culture to achieve higher educational, professional, and social advocacy objectives.

Networks Systems Extending from Family Units, Church, and Community

Intersecting networks of people associated with their family units, community, and church exposed the women to educational, political, and cultural leaders in the community and encouraged the women to believe in their capacities as talented Black females. These supportive networks fostered dreams about career and leadership possibilities that were broader and more substantive than those framed by the dominant culture. Rather than limit the women to the stereotypical role of domestic or factory laborers, the people within these networks urged the women to assume professional roles in science, health, education, and the arts. These networks were not planned by the women as self advocacy efforts but were the out growth of associations, friendships, community and church activities in which the women and their families were engaged.

> We were also exposed to a lot of growth experiences, my mother having three years of college herself, and also very active member of a service sorority that was quite active in Detroit at that time. She exposed us not only to swimming lessons at a very early age, but also French lessons. There was a woman that she knew in the sorority that was a French teacher so we had private French lessons. We also had ballet lessons from a woman in the Church who was an accomplished ballet dancer. Later, my mother was a piano player, and we had piano lessons …. Somehow I was interested in the violin, so my father, always giving us the best, decided that I would take lessons under the first violinist at the Detroit Symphony Orchestra. So I had private violin lessons. I don't know where he found these people but he had contacts…. We were exposed to many, many

cultural activities and social clubs and so forth. (MM)

> Now when I was seven, my parents had saved up enough money to buy their own two-story apartment building…. It was a lower middle [class neighborhood] maybe. It was very close to the University of Chicago…. Now the reason that's important is because in this era, the 1940s, Black people could not live in Hyde Park, which is where the University of Chicago was. The first African American faculty person at the University of Chicago, Elson Davis, he's on a stamp now, lived across the street from me because he couldn't live in Hyde Park …. I can remember my mother saying, 'Elson Davis has no impact on this neighborhood. He doesn't come to any of the block club meetings. He doesn't participate in any way,' because he was oriented... with the University of Chicago. But eight kids, just on my block alone, got PhDs. I have a brother who is a physicist who got a Ph.D. I could just name them all. So he had a tremendous impact, but you couldn't see it. I used to wash dishes for him at night every day. That was my job. I loved going to his house because it was a very different house than my house. The furniture was different. The people [were different]; the way he entertained was different. They were all University of Chicago people. So it really was an education for me (WS).

These networks also provided access to services and accommodations that were otherwise denied the women and their families because of the color of their skin. The women learned from their fathers and mothers how to utilize selective networks with members of the dominant and Black cultures to procure financial loans and material

goods for other members of the Black community that could not be accessed directly. Through the networks, they learned how to find safe overnight accommodations in the homes of other African Americans when hotel accommodations were denied them.

> Our home was always open to people who came to town... because at that time there were no hotels where most Black people wanted to go. Unfortunately some of the places that were available had reputations that you weren't quite sure about. One year, when I was fairly young, the National Bar Association met in Little Rock. We had several very prominent attorneys here and they were family friends.... Two ladies, who were attorneys from Washington, D.C. stayed with us.... I'm not sure that I knew any Black women who were anything other than teachers, nurses. I don't think I had even seen a Black woman who was a doctor. I knew many Black women who did domestic work or who were hair dressers or in service kinds of occupations. But when the two women came who were lawyers, it suddenly gave a new dimension to what was out there, what was available for women to do if they had the interest....
>
> Most of the other people that we had in our home, were probably people who were either ministers of some of these small churches where my dad did their printing, or people who were from their congregations who were coming to town for some particular reason.... When we lived in the other house there were beggars that would come along, and they would have symbols that they would put on the sidewalk, I'm told. Others would come through and see those symbols and know that they could get a sandwich there and get something to eat at that house,

> because I know my mother had made sandwiches for people. They never came in the house, but she would feed them on their way through (MR).

Some of the women were family members, neighbors or lifelong friends of political leaders or leaders in the entertainment business. One woman and her family were friendly with Lionel Richie and his family (RB). The mother-in law of another woman, SM, attended school with Mary McCloud Bethune. Her brother-in-law served as the first Black judge in the Michigan Federal Circuit court, and then was appointed by President Carter as Solicitor General. SM also was a life long friend of Betty Shabaz, the wife of Malcolm X. She sang in the church choir with Betty Shabaz and cared for her and her children when they visited Detroit. As a teenager and young adult, SM went to high school with, played music with, or was accompanied by well-known musical artists such as Betty Carter, Lionel Hampton, Kenny Burrell, and Dorothy Ashby. Through these networks, SM sustained political involvement within the city of Detroit and the state of Michigan to advocate for African American community needs. Also, through these networks she maintained involvement in the cultural life of Detroit, bringing nationally known artists into the Detroit hospitals.

In addition to the social and political linkages made possible through family members and the community, the church networks offered spiritual linkages that nurtured the women's beliefs in their personal and communal strength. When they were adolescents, these networks afforded opportunities for the women to obtain peer support. They served as a segue from the neighborhood into the larger community of faith, for most, the larger African American community of faith. They provided direct access to and

role modeling from adult community leaders.

> People identified with their churches very strongly on the West side. West side or East side or whatever side. Church is where the leadership, the networking connections took place. The ministers, as I recall, were very active, not only in the community but some of them had a strong enough voice for the city to listen to.... They tried to make a difference. There were a lot of civic kinds of concerns in our neighborhood, like the quality of life, if there was too much traffic and so forth. Getting a traffic light here or doing something there. There were also family concerns, later, about the high school and again having some representation. [They advocated for the school to hire] a Black counselor or someone up there who could understand [the needs of the Black students]. (MM)

As adults, networks of people within the church offered the women assistance with family responsibilities and emotional support for the tasks of living. They expected the women to sustain commitment in community endeavors. In return, members of the church networks contributed their talents and energies to community projects spearheaded by the women.

> My pastor is one who feels that our generation has just taken advantage of what people have fought for us [to have] and that he really feels that we need to give back. That's part of what we're doing in trying to reclaim the neighborhood that our church is in and building the Family Life Center and building the Bethel Towers. We have a restaurant and have a program that's called Program Create where we do job training for people who have not been able to have gainful

employment. [We are] making the whole neighborhood like you would want to live and be a part of the neighborhood. The houses look like I would want to live there, whereas five years ago you were afraid to walk through the neighborhood....

One of the things that I'd like to do, hopefully, while I'm still at FAMU and as part of the Bethel housing... is to replicate the study that Florence Clark did on the well-elderly at California. I spoke with her just briefly about that.... We could use our population as the experimental group and then we could use the control group from one of the other facilities that's close to Bethel Towers. There is another facility that's within like five miles from where we are. [We could] see what would happen with these people who really had occupational therapy on a regular basis and the other facility where they did not have it. So [I'm] still following the dreams that I had back there at St. James. (BS)

I still do some things in Alabama and working with the community. I help out with one of the churches we were working with to start a clinic. Before I left Minneapolis, I did open up a clinic that is still is working, open now. It is a free clinic that offers OT and PT services. Catholic Charities gave us a free professional building to use. That was very much a gift and a surprise. I have that clinic going and PTs and OTs have come forward to volunteer in the clinic. This church in Alabama wanted me to do the same, to start a clinic within their church. Because people are very poor there and the economy is just very, very low, it would be very helpful to the people and they would be helped a lot (CC).

The Network System Extending from Educational Institutions

Within educational institutions, networks took on increasing significance as the women transitioned through high school, undergraduate, and professional education. In high school, networks with other peers furnished opportunities to explore academic, social, and leadership competencies. That most of the women participated in multiple networks within the high school reflected the expansiveness of their interests and the depth of their talents.

> One of the traditions in the school is that you had a relationship with the class of 50 years before you. So, the top scholars got to wear the dresses from 50 years ago. [The women were] usually the speakers at your class days, women who [were] in their 60s who had wonderful lives, judges, doctors, authors. They came and shared their experiences. So that you immediately knew that there were these women out there that had done well. It was an environment focused on self-actualization....
>
> There are an awful lot of women that I still know today from high school... A couple of them have gone on to have stellar careers. The majority that I keep in touch with are in social services or health services types of careers. I've just been fascinated with the numbers of us that have landed in social work, medicine, law, things like that. The two people that I've said I've been proudest of to know as classmates of mine; one won the Amelia Erhart Award as the first woman 757 pilot in the United States and the other just got a Marshall Genius Grant, Anna Deavers Smith, who's a writer, a scholar, is on Broadway, has been all across the

United States, has been on PBS with several one-woman shows. (PK)

The level of appreciation for cultural diversity within the communities and schools also impacted the degree of access these women had to networks in high school. Some of the women experienced membership in networks that blended together opportunities for academic, social, and leadership development within ethnically and racially tolerant environments. Others learned that they could access some of the White networks only for academic purposes and only during the school day; social interactions in these networks did not to occur beyond the school bounds.

> All of the Black kids in our class were a cohort. We were not all best friends but we were friendlier with each other than we were with the greater majority of White kids. Now, each one of us had our own selective group of White kids that were our friends.... Now, by friends in the White group, that meant during school time and during extracurricular activities. There was never any out of school socialization. They got on the bus and went wherever they went and we knew where we went. Outside of school, our entire social life centered around us as young Black kids in Chicago. (CH)

In the colleges and universities, the importance of networks for the women expanded to include opportunities for political and professional leadership development.

> The Civil Rights movement started. We joined SNCC (Student Nonviolent Coordinating Committee).... We went to all the SNCC meetings and it reached the point of sit ins....We distributed pamphlets and flyers and we attended rallies....

> We really were becoming aware of the tensions in our world and the world at large. (CH)
>
> So we, even though we knew they were meeting some federal laws, we took it as an advantage for us and didn't look back. I became president of the Black Students' Organization while I was there and did a lot of stuff in peoples' faces to get what we needed. I'm not a belligerent person. Some of the things we got and some of the things we didn't. I had a couple of confrontational things with the White male students because they resented Black folks coming in and taking positions that they felt should have been their friends or sisters…. We [stepped] ahead and they just resented … it and [started] acting like this is unfair. Well my God, it was unfair for years …. I think we all felt good about ourselves, just because of whom we realized we were. For those who were particularly outstanding, it made all of us feel proud. We were looked upon as tokens but when we got there it was proof positive that [we could excel]…. As a group we felt vindicated in a sense as Black people that yes, we should be there. (KB)

As in high school, some of the college networks blended together opportunities for learning and socializing in culturally tolerant environments; others drew distinctions between membership for academic and social purposes based on skin color. A number of the women actively sought membership in national Black sororities to form liaisons with other talented Black women who were committed to academic excellence and social advocacy. The Black sororities afforded gender and ethnic validation, respite from the

racial confrontations of the dominant culture, political strength, and practice opportunities for leadership.

> A very major experience in my life as an undergraduate and since then was being a part of a sorority. Within the United States there are two major Black sororities. There are two others that have come into the fold later, say post 1940s probably, but two primary ones that existed in the beginning of the 1920s. Historically those organizations allowed Black women on college campuses a place to kind of be and relate to each other and such. As Blacks moved into predominantly White schools, those sororities played even a stronger role in a central place that Black women and in the case of men, certainly the fraternities, could find each other. That was certainly true on my undergraduate campus. As a member of the sorority, I had a place called home and home was really with the other members of that sorority. [I have formed] strong powerful, life long friendships as a result of that association.... If you look at most African American leaders, male and female, middle-aged right now between 40 and 60,... a lot.... have been active in the sorority throughout their lives... They're lawyers and judges and doctors and teachers, but they remain active with the sorority. (CH)

Interactions with key faculty and fieldwork educators opened opportunities to explore professional aspirations, assume increasing responsibility, and meet leaders in occupational therapy. As a result, the women received validation about their professional worth early in their careers.

> I was coached by some of the faculty in things that I didn't know.... When I was program chair for the occupational therapy student association, I got help from faculty who would coach me in what I needed to do that I didn't know. [One was] Rosalia Kiss Schwemm. She just celebrated her 85th birthday, and she and I still correspond at Christmas time. I saw her recently at the 75th anniversary of the OT program. I had a lot of support to do well. I think, in some ways, it was kind of a source of pride for some of the faculty and for Miss Spear who was a New Englander and who had a lot of pride and self-determination.... Miss Spear was proud of all of her girls, as she called us. She followed our careers for many, many years until she died. If I would see her any place, she could rattle off all the things that I was doing. It was just very surprising to me, first of all that she was keeping track and that she would remember.... I've had mentors and I've sought mentors for those things that I needed. (LL)

The Network System Extending from Professional Associations

During their professional careers, the women sustained membership in professional networks and with professional colleagues inside and outside the field of occupational therapy. They involved themselves in committee work and other professional activities, thus creating multiple opportunities for informal learning beyond the bounds of formal institutions of education. Some women received guidance and support from nationally recognized leaders in occupational therapy. Several of these leaders were White women who assumed national leadership roles after the first wave of

male leaders had left the profession after World War II. For example, Beatrice Wade provided additional support and learning opportunities for WS and CH; Wilma West supported the work of LL; Florence Cromwell guided ES; and Cordelia Myers inspired PK.

The professional networks provided human and material resources that enabled the women to enhance their knowledge base, reasoning skills, leadership talents, political astuteness, and professional competencies. They extended to the women opportunities to sit on policy making boards at the local, state, and national levels and to influence health care practice. Some of these boards included National Cerebral Palsy Association, Office of Civil Rights, the Governor's Commission on People with Disabilities, and the Veterans Health Care System.

Because of their race, the women experienced varying degrees of acceptance within these professional networks. Some offered both professional and personal validation, recognizing and celebrating both the talents and the heritage of the women.

> The move from Lafayette Clinic to Mount Zion Hospital in San Francisco came about because I really was ready to make a move.... I'd also published a couple of papers with Eli around the evaluation and treatment and several with the team [at Lafayette that was] working on cognitive perceptual motor dysfunction and evaluations.... Wilma West, who was at Maternal and Child Health, called me at Lafayette Clinic and said, could I bring my team to St. Louis to give a presentation....We were able to pull that off and Wilma West was very impressed

with that. She was also the person who was responsible for all of the Maternal and Child Health projects all across the country and there were fifty-two all together and there were only five that had occupational therapists.... I [then] got a telephone call from one of the pediatricians... to come to San Francisco for a position.... They were looking for a Black occupational therapist with a master's degree. At the time, I only knew one other one.... Marianne Maynard.... So that's how we got to go to San Francisco as a part of the Children and Youth Project which was a demonstration project....

1969 is when I was awarded the Eleanor Clarke Slagle lecture. I had been nominated before several times by colleagues in Michigan. I believe that it was related to those things that we had accomplished in the projects at Lafayette Clinic and the things that I was doing at Mount Zion Hospital. That crystallized the thinking of the people to award me the Eleanor Clarke Slagle lecture. I also believe that Wilma West had a great deal to do with it. (LL)

In contrast, other professional networks afforded professional but not personal validation. They acknowledged the women as talented therapists, but did so by overlooking their ethnicity. It was as if these professional networks could accept the women as talented individuals only when viewed as separate or "de-raced" from their biological and cultural heritage. Still other networks did not offer even professional recognition because of racist beliefs. These networks minimized the professional contributions of the women because of the color of their skin.

> [When I was] writing the [Slagle] lecture, I was conscious of the fact that there would be people who would not be able to hear what I had to say, because they would have a problem of who I was in saying it. I was an African-American woman, what do I know. So it was very important for me to create the visuals that I did, the schematic and the premises, and to be able to share that with the audience because educated people place a great of value on what they see in black and white. I was counting on the fact that people could see that for themselves and they didn't have to deal with whom I was....The [visuals] were a hit. People really, really, liked them. [However],...I was validated in my suspicions. One of the leading occupational therapists in the country came up to me after the lecture... and said to me... 'I thought that you were going to have us practicing occupational therapy in the ghetto.' And a second comment was, 'Well, what you said is not really new but no-one has ever put it together that way before.' (LL)

Except for those practicing in the Detroit and Chicago areas, many of the women had not seen another Black female occupational therapist until they attended their first national occupational therapy conference. They then began to meet informally with one another at the conference to provide emotional support, and professional and personal validation. The women did not assume the role of mentors but colleagues to one another.

In 1974, through the efforts of some of the women, these informal gatherings blossomed into the Black Occupational Therapy Caucus. This network served to formally unite the Black occupational therapists and raise the awareness level of AOTA to the

concerns of African American occupational therapy practitioners. As in other institutions, the formation of a formal Black network met with some resistance.

> There was a lot of concern among some Black people about having a caucus. There were a variety of kinds of concern. Some of the White people felt we didn't need a caucus. Some of the Black people felt it would make too much trouble for them, calling attention and then making things worse rather than better. Some people felt that there wasn't any racism in AOTA or in OTs generally. But never the less, we all had experiences of racism in one way or another, some subtly and not so subtly, overt and whatever in different areas. I said, 'Don't be silly. This is the kind of country it is so it will be in the organization also. People catch hell in a variety of kinds of ways, especially the students because they have no support.' (ES)

In spite of these tensions, the BOTC served as a critical network for uniting the voices of the women in a political forum within the national association. Through this unity, they created a safe haven, identified common strengths and needs, sought and provided professional recognition, and learned from and taught one another.

> I do remember the formation of the occupational therapy caucus in 1974. I had just come to Washington in '73. The AOTA conference was here in Washington in '74 at a hotel and I remember that evening there were several Blacks in the lobby of the hotel. I think for the first time a lot of us, not a lot but whatever number of therapists there were, were kind of recognizing that 'wow, I'm not the only therapist in some place.' We saw more Blacks than we had ever

seen. We had no way of knowing each other or anything about each other or what they were experiencing. It really developed out of a sense of needing to know who can I call when I have to.... Many Blacks, all women then, I believe, were either feeling very isolated on their jobs or feeling very much like they were looked over for promotions.... So we really came together as a support system... a safety net....

The other reason that if you wanted to move to another part of the country you might have someone to call or connect with. It could serve very much the same functions as sororities. That's very much why those clubs formed. You needed to know a brother or a sister if you were going to a certain town, because you certainly couldn't stay in hotels...

The Black Caucus also....makes contributions to try to help one [Black] student in the city, wherever we are going because there are truly students who need money and who don't have real resources....I certainly think the Black Caucus has evolved to the point of recognizing the need to mentor some Blacks.... It's designed to encourage the student to stay in the program that they're in.... Sometimes, it gives them a different perspective on how to respond to [racism].... Often you'll find that the older Black therapists say to the student, 'Why don't you redirect your energies over here. I know that must hurt, I know how that actually appears to you, but why don't you try to get what you can from the situation. Is there a way'....

I think now the Caucus is interested in making a significant contribution to the profession, in terms of a recognition of Blacks. It's not for the sake of Blacks;

> it's when you look for role models, there are none or there are very few. The ones that are [role models] are dying off or retiring.... It's a matter of you not having pulled anybody along, there is nobody there. So that's kind of where we are. (SJ)

Summary of Learning Paths Within the Network System

The network system included friends, peers, colleagues, supporters, and mentors within family units, church, community, educational institutions, and professional associations. For many of the women, networks with other Black students, sorority sisters, professionals, and church members provided support systems where the women could discuss topics from perspectives other than those which they could in the larger societal context. This allowed for balancing of professional with cultural beliefs and for coping with issues of racism, and afforded opportunities to develop leadership skills within zones of racial safety. Non-Black network systems, on the other hand, provided a method for navigating through the institutions of the dominant cultural to achieve higher educational,

professional, and leadership objectives. Within these non-Black network systems, the women experienced either acts of racial discrimination, de-racing, or validation.

Learning Paths within the Personal System

Strongly influenced by family, educational, and network systems, the women learned and developed within their own personal systems. The personal system included

cognitive, physical, social, and psychological capacities, as well as the belief and value schemes of each of the women.

Personal System Developed During Youth

Early in their home, school, and community lives, the women demonstrated a curiosity for learning about multiple dimensions of their worlds. Academically talented, they associated with other children who explored a variety of topics and interests. Trusting in their physical capacities, they participated in competitive sports and games. They found pleasure in doing tasks with their hands that stimulated their mechanical and artistic talents. They strove for competency in their ability to solve puzzles, to construct, and to put parts together to make a whole.

> I was getting into paper and making paper. Made so many molds for doll faces. I can use these same molds for making paper faces for greeting cards and Christmas angels for hanging on trees and that sort of stuff. When I had my show, I made a lot of little angels, Black angels. All that stuff sells very well. (KB)

> I have come in recent times to really realize that I am very comfortable with an inductive approach, reasoning, putting together puzzles. I used to do that, putting puzzles together all the time, during high stress times.... If you wanted to take a break, you'd come down stairs and work on the puzzle. (JL)

Within the shelter of their families and neighborhoods, the women developed pride in their African American heritage. "We had nobility"(NW). Rather than perceiving themselves as capable of displaying only stereotypical female

behaviors, they saw themselves as demonstrating those attributable to both males and females. Many of these attributes were learned from their mothers and fathers or adult caregivers. The women developed a sense of their own unique identity, framed within their African American heritage and co-mingled, gendered roles. They did not set narrow limits for themselves nor permit others to place narrow limits on them. "I'm Black, I'm good, I'm female" (CH). I learned very much how to do everything that a boy would do. I could put a motor in a car. We worked on putting motors in people's cars in the evenings when [my father] came home from work.... I can remember working on the transmission of trucks way back when and changing the oil and doing things like that.... I taught my self to sew. I've never taken a sewing class, but I can make suits. I started making shirts in school.... I would sell to the guys in my class, I'd go to the store, they'd buy fabric and I'd charge them $5 to make a shirt. (SJ)

I wanted to be successful and I was... it was instilled in me that I could be whatever I wanted to be and so I was very confident and I was very self assured, okay. But I didn't feel driven and so the things that have occurred in my life as successes have not been totally a surprise but I set out to work to achieve this. It just fell into place and I know that I didn't do it by happenstance. I know that I worked hard. (ES)

Spurred on by important adults in their lives and validated by their peers, the women exhibited beginning leadership skills in school, church, or community affairs by the time they were adolescents. As part of this emerging leadership, they began

articulating concepts of social justice that reflected their sensitivity to individual and community rights. They were willing to confront authority figures in support of their belief systems.

> There was this other stuff happening in Alabama and then there was this,... 'We need students to go to Selma, who wants to go?' I tell you, my hand went up by itself. It really did. I mean, my mother told me not, not to leave the campus. Don't go. My hand went up. Janice's hand went up.... She and I represented our wider group of friends.... I remember going to my sociology professor and saying, 'I have to do this, and I am going to miss the midterm, and can I take it when I get back.' I remember him saying, 'No.' 'But isn't this sociology in itself and don't you see what's happening here?' I remember the very high argument I thought I was presenting that said, 'I could come back and write a paper on this. I could come back and be tested on this. I'll come back and even take your exam but not tomorrow.' 'No, if your not here tomorrow, you fail it and that's that.' I kind of remember leaving and saying, 'Fine, I'm going.' (CH)

Personal System Developed During Adulthood

As adults, they expressed belief in their own capacities to make positive change, to create a better situation while simultaneously empowering those around them. They accepted responsibility to open doors for the Black race, to educate, take care of,

contribute to the betterment of all humanity. They committed themselves to giving back to others in thanks for all that they had received.

> I've been on various boards, but right now... I've just accepted a position on the board of directors of our local medical association and I'm finding that to be an absolutely fascinating experience. I've been around health care all my life, all my professional life, but I'm seeing it from a different perspective as a board member. My concern has always been in providing the best possible services to the patient without always having to worry about the cost or how you get what you need to do it, but that you just simply need to have the skills in order to do this. From the board member's perspective, I really have to consider the entire program of services. I really have to consider how everything fits into the puzzle of providing this wide array of services. I also have to be aware of cost containment activities that may impact different aspects of the service provision, which sometimes doesn't always seem terribly fair to me but I understand why it has to be done. (MS)

> I think I have always felt dedicated to doing my small part. I'm not somebody that just sits at a counter and gets knocked over, or anything like that, but I felt dedicated to offer to my generation of occupational therapists and the people that I work with, something in return for what I had received a bounty. (NW)

Viewing themselves as ambitious, they learned to be tenacious, organized, and disciplined. High achievers, they developed a strong faith and code of ethics. To solve

problems and envision possibilities, they created networks and engaged in dialogue with others. Willing to take risks, they enjoyed being with and giving to others.

> In the [Kellogg Alumni] forum we got to talk about passions. [Often] you scare people when you talk about passions or you start talking about visions.... [In the forum] I've gotten validation. Which I think is important, I don't think one can operate in isolation. Maybe some of the people just burned up, didn't have a place to get that support. I think you've got to have that, of like-minded people. Like-minded doesn't mean we'll say the same thing at the same time, but like minded in the sense of, 'Yes, go ahead and take that stand.' (JL)

Choosing not to allow racism and sexism to control their lives, they celebrated their capacities in spite of racial and gender discrimination. They dealt with racism and sexism through selected strategies of silence, negotiation, and confrontation as defined by Collins (1991). The selection of the particular strategy often was deliberate, based on the context of the situation, the ability to impact change, and the cost to personal and communal safety.

> Now it's funny because every place I went I was the only Black person. I said, 'I better stay in the middle because they might separate me out and I might find myself in trouble.' So I said, 'I'm going to be the spokesperson, I'm going to be right in the middle of everything so I don't get left here all by myself. (WE)

> I used [silence] quite a bit [when I was in high school], because with the counselor there was no way of challenging her....The teachers... seemed to come from a biased point of view. What they were presenting to the class was so

biased....The best way of coping was just silence. Sometimes we would give them a look, an intimidating look with the eyes, focusing on them, not a pleasant look, but nothing other than that. Because that way, if you said nothing, they couldn't attack you and many of them were just ready to verbally attack. (MM)

I started to ask the African American women I sampled about their experiences. I was wondering if their experiences were like my own [which was being] encouraged to get involved and then often pushed away or not given credit for doing things. I was wondering about their experiences of pushing themselves in and making themselves fit and making things work …. Many of the women had the same experiences that I had …. Many of them had come from families who acknowledged that they were going to have a very difficult time but they were expected to achieve. They were expected to reconcile differences. They had been taught to harmonize, to blend in, to make things work.... So there was just always a tension there. To be the best that you can be but to know that you're going to have to fight to be that. The fight isn't necessarily an oppositional, negative one. Sometimes it has to be harmonious, it has to be one that you do on the sly. It has to be many strategies that you take to make this thing work. (JB)

I think for me as an African American woman... I carry with me a legacy that I'm very serious about. I've got to make my money and I teach my classes and teach my research class and all that. But I'm also doing something else in that classroom other than, let's get these different research designs straight. I'm holding these students to truth, I'm also teaching them some other kinds of lessons

> in there.... For me I think it comes from having been at Howard so many years, where you're immersed in an environment where the issues of race are always there. It is an environment where it's valued and that you have a mission to put more people out that will not be silent.... We can't afford it, we can't afford it. (JL)

Not content with resting on their achievements, they viewed themselves as still in the process of evolving. One woman chose to become a foster grandparent for children of parents with AIDS (JL). Another donated her services to Habitat for Humanities (BS); another woman volunteered her time to provide orchestral music programs to children from disadvantaged backgrounds (MR).

> I see myself as still becoming…. I am not finished yet....There is something more that I need to do and want to do that I am not doing yet. I have a very big client now … I see myself as in a growth process as I work with this client. I am not at the place where I can say, and this is what I have done. I am not ready to say that yet…. I can see the peak of the mountain, but I haven't reached the peak yet. (WS)

Summary of Learning Paths Within the Personal System

The personal system included the physical, cognitive, psychological and social capacities, as well as the values and beliefs of each of the women. Dominant was pride in their African American heritage and conviction that they were blessed with cognitive, psychological, spiritual, and social talents. They viewed themselves as tenacious,

ambitious, disciplined, and organized. They saw themselves as harmonizers who facilitated learning networks. They articulated and practiced standards of moral and social ethics.

Given their ethnicity and talents, the women understood it was their responsibility to take care of, educate, and empower members of their immediate family and larger community. In spite of racism, they were to find ways to negotiate through resistant societal structures to achieve greater goals for humanity. They committed themselves to lifelong education and societal advocacy, and professional leadership pursuits.

Learning Paths within the Societal System

The learning paths the women traversed within the societal system of twentieth century United States influenced those that they experienced within their family, educational, network, and personal systems. The societal system included the historical, political, social, and physical contexts in which the women lived.

Influences of War and the Civil Rights Movement

Born between 1916 and 1961, the women grew and learned within changing historical and political contexts highlighted by such events as World War I, the Depression World War II, the Korean War, the Civil Rights Movement, and the Vietnam Conflict.

When we moved to the other side of town we were getting close to World War II. I mention this because I remember my father died in ‘44. When we think about play, the play in the neighborhood where I lived was very serious. You were taking care of business. I remember going to school, coming home, helping to cook because my mother worked at a munitions plant where she had to leave at four in the morning and didn’t get home until very, very late. So the play was really reserved for weekends and summers.... During the week day, it wasn’t just survival but it was serious. It wasn’t little girl play... we had things that we had to do. (SI)

When WW II came there was a munitions plant that was built in Jacksonville Arkansas, which is probably 20 miles from here.... A lot of people went there to work. In fact, my mother went out and worked there. She always laughed and said, ‘Some of you may think that Abraham Lincoln freed the slaves but as far as I’m concerned Ford, Bacon and Davis freed us.’ That was the name of the munitions plant. That was the first time that Black people, in this area, had ever had a minimum wage that they had to be paid. Until that point you just worked for whatever you could get. It was the first time that many Black people in this area had any salaries that were worth anything unless they were independent business people. (MR)

When [my brother] would come back from the service, he was shot....he would always bring guys home with him.... I was just in high school.... It didn’t matter if they were White, Black, or whatever. He brought all shades, colors, and

> breeds home with him for the weekend because most of the guys were not from the state [of Texas] and they just wanted to get out of the hospital. Listening to them [talk about their] night mares and...the experiences that they had in Vietnam were really mind boggling. It really impressed me a lot. I wondered how they were going to get through that from a mental stand point. That was my introduction of really starting to understand what it meant for them to be in a war and some of the things that they had seen. I saw it on TV but it didn't really matter until I'm sitting there listening to them tell stories. These are guys sitting in the house and they are showing you where they got shot and they are showing you these wounds.... I also had the opportunity to see some of them over the years after they got out, and saw the difficulties that they had in trying to put their lives back together. Some made it and some of them didn't. (SW)

Influence of Political, Social, and Physical Contexts

The women who participated in the study grew and learned within changing political, social, and physical contexts marked by segregation mandates, post-depression and post-war economic and health recovery efforts, de-segregation initiatives, the Great Society reforms, women's rights campaigns, and Affirmative and Anti-affirmative action debates.

> It wasn't really until Martin Luther King and Rosa Parks and all those people, that I really became aware of people non-violently trying to improve their situation. We felt wonderful in Roosevelt's administration. I was aware of all of

this and my mother and father, I must have been home then because I remember being brought to Washington for the inauguration.... [I was] awarded scholarship,... all of this was under Roosevelt. (NW)

[The polio unit at Tuskegee] was put up because of the discrimination, segregation. I wanted to see what was happening at Warm Springs because [the unit at Tuskegee] was supposed to be a like Warm Springs. Arrangements were made for me to go Warm Springs. My husband, who was a registered physical therapist at the time, went with me. We were welcomed and shown around. Then when lunch time came, they showed us the employees dining room. So we just said, 'Well, thank you but no thanks' and came on home....

At one point too, during one of the March of Dimes campaigns, I was asked to make a little talk on the radio and I would have to go to the radio station, which was located in Montgomery, Alabama in one of the hotels. When I got there, I was taken to the freight elevator to go up to make this little pep talk for the March of Dimes. At some point you know something is bigger than yourself. This was more important so I just went ahead with it. It was just one of the experiences, though, that I was exposed to because I was Black and because I was living in the South (RB).

[Token representation] might have been their intent at the time. I saw this as an opportunity to make a statement, whether it was verbal or nonverbal. One of the executive directors of an affiliating United Cerebral Palsy said to me at one of the national meetings that I co-chaired [for] the Development Disabilities Act...

that he didn't realize how white United Cerebral Palsy was until he saw me. So I figured that was a nonverbal statement, just being there. So, sometimes the token, if they're not true tokens, just by being there can make a statement of importance....But since I was there and I was invited to the party, I decided to have equal status with all the other players. In my early days from my parents I learned to be a diplomat in a foreign country. I tried not to antagonize but at the same time, I refused to be compliant. (ML)

I've seen [little] being done around policies with people of color. I think it links to… the composition of national committees.... You will not see people of color in leadership. We will be added on when you have to give credibility and it's so conscious. I think we will be free of the issues of race when it doesn't have to be consciously done. When it accidentally happens…. [when] people with the talent get the opportunity. We're not there. So when we do it, it has to be intentionally done, rather than naturally. When I look at policies and how they're developed in the upper strata, people of color are not involved…. You'll find people of color maybe gathering the data or maybe consulting but they will never be directing it. So [their] experiences are missing when the policy is crafted. I don't see in health policy, a collection of scholars of color where they work in a policy institute that can make a difference.... You'll never see a totally Black African American, a totally minority committee dealing with anything other than race or multiculturalism. (JL)

As a result of the historical events and societal norms of twentieth century United States, some of the women grew and learned in legally segregated areas of the South. Others grew and learned in unofficially segregated areas of the Midwest, Northeast, and North. A few grew and learned in areas that were racially integrated to varying degrees.

> It was almost like the status quo.... I'm not so sure anybody ever came up with any solid reasons why it was that way and why it had to stay that way. You just kind of lived with it. Because, somehow, never the twain did meet, there was no great deal of discussion ever given to issues of segregation or integration or whatever. We just kind of moved through life. I was almost oblivious to the fact that there was real hard line segregation because I didn't go into areas that exposed me to anything that would have aroused too many questions. That really sounds shallow doesn't it....We knew what we could accomplish and we knew what we were capable of... We simply did it within the confines of what we had. (MR)

> I also grew up knowing that there was... another world besides the one that I had. Knowing that mine was totally Black with the role models, expectations, and everything was totally different from when you go over to or out into the 'White folks world' as we called it. There was a certain way that you were expected to act around them versus when we were in our own community and our own environment. You learned to exist, shall I say, in two different worlds, and you could cross in between them without any problems at all, if you got the message right. (SW)

> I would say, basically the people were very strong, assured of themselves. Although they worked basically in a predominantly White community, their home base was that [Black] neighborhood. They could always come back and the comfort in that neighborhood was it. Although my parents belonged to a mixed group of associates in their work and some in their relationships, I think they shared in that whole neighborhood that common element of basic security, love, because it was really expressed by everyone in that neighborhood, acceptance and being proud of who you are. Education was a high priority.... [People in the neighborhood] selected careers, highly successful careers, providing a path for others to follow. (MM)

Historical events and societal norms also affected differential access to material goods, human resources, community services, and work environments, influencing educational and leadership opportunities for the women during the twentieth century.

> I had [Black female teachers] in both elementary school and high school, who did not have college degrees, but who were excellent teachers. It was surprising to me, but back in those days you could teach at 8th grade. Plus the fact, I'm not so sure that school boards cared very much whether Black teachers were qualified because they knew they were only going to teach Black children and they didn't really want us to learn too much, when you got right down to it. (MR)

> When my girls were growing up, we were very concerned that they received the history of their people and really went out of our way to make sure this would happen.... In my school, it was a given. I remember learning the Black National

Anthem.... Somewhere along the line, I learned the other anthem, but the first anthem that I learned was the Black National Anthem.... Education was the key... 'you're going to have walk not just ten miles but ten and one half miles. You've got to do more than good. You've got to do better.' This was hammered in all the time. (SI)

It was probably a better time for me [than my older sister] because this was during the aftermath of the 60s and early 70s and there was a lot more opportunities for Blacks to get into more professional careers and positions and whatever, as well as getting into school and more predominately and prestigious kinds of universities and colleges. (SW)

I was never discouraged to come to OT school. I now recognize that they wanted me, they needed me because they had gotten a number of federal grants that required them to have Black students. So they wanted Black students and it happened that I was a talented Black student…. There was a structural reason for them being encouraged to have me there. Had that structural reason not been there, I'm not so sure they ever would have cared. (JB)

The other piece that happened [when I gave] the Eleanor Clarke Slagle lecture was that the auditorium we were in...was like a ballroom. The chairs were all on the ballroom floor. Up above there was a balcony and the balcony was ringed with all of the people from the kitchen staff, the housekeeping staff, from the bellhop staff. The rumor had spread throughout the hotel that this Black woman

was addressing this audience of primarily Caucasians and they all came to see. I looked up and I couldn't believe it. They were there to witness it, but they were also there for support. (LL)

Through the societal learning paths, issues of sexism also arose. However, the women perceived that the sexist incidents occurred less blatantly and less frequently than incidences of racism.

> I didn’t realize about gender until I was on the dean’s search committee. The remarks that they would make about women on that committee! There was an OT student on that committee and I was on the committee. We were the only women on that committee of about ten. It was just unbelievable some of the things that they’d say. There was one woman who had a nickname of Boots that was applying to be dean and they just really went wild with that. And comments they’d make about other people. Like we were invisible actually and they didn’t even care. (SM)

Gender discrimination would [happen] for administrative type positions. A male will be chosen over a woman for many different types of administration positions, like at the hospital. There’s a couple of times I was looking for an administrative position and was told that men tend to get those positions … indicating to me that I probably shouldn’t even think about applying.... When I have been in administrative positions … it was not said directly but encouraged that 'If you’re going to have a male, pay them more because they’re going to be the head of the family. If they were a male by themselves pay them more because

> they're going to probably stay with you longer than a female. A female will probably leave after a little bit because sooner or later she'll get pregnant and leave. Hire males over females because they're more stable'....
>
> Also, when I was interviewing for a position, I would find out later that the guys would have more pay per hour than myself. I would have more experience but they got paid more. Again I would find that out probably a year or so after I was hired when you would sort of casually talk about cost of living raise, and how much did you get. (CC)
>
> Society's expectations for African American woman are not very high....
>
> In case of a job situation you sometimes will find that a male colleague will downstate what you have said in the meeting, even though he may seem to have previously supported you. He will say 'Yes we'll do it this way.' Then he'll go and sabotage whatever you've done, or try to take the credit if you have done something great.... Certainly in universities, or any social system, you'll find this occurring. Any time you climb the ladder of success, you become more of a threat especially to White male colleagues. You have to be aware that this is going on. (MM)

As these women moved into higher positions of leadership and socioeconomic status, the learning paths within the societal systems became increasingly complex, often challenging personal goals and affecting communal relationships.

> We used to talk about [what it] meant to be a Black professional and not really fitting in anywhere and how do you deal with that.... He would share with

me some of his thoughts on the matter, which really made sense. He said, 'You build your own circle of friends and you hang onto them for dear life because you will never fit in anymore, anywhere.' I was so angry then... 'It's not fair. Look at all the things that I gave up just to be here. Nobody else had to give up anything.... I have no options. I can't just, as they say, go home anymore. I don't fit in over here either....This is a hell of a price to pay for so called success in America.' (SW)

I think the other thing that you have to realize is that it's hard for Black women to make a decision to do a Ph.D. or take a doctoral level because it makes a farther distance between you and a Black man. Black men continue to have a need to feel that they are the head and in charge. They have a strong need for respect from a Black woman. I think a lot of the turning away of Black men to other races of women, really has to do with the need for respect that they feel they can't get from a Black woman. I've been very sensitive to that.... I saw that happen with another faculty person here. I kept saying 'You better hold off, you're pushing too hard'.... I think she marched and he marched because it was just too much. It's a real tedious kind of balance that you have to have. (SJ)

I think more and more African American families, in order to be successful by mainstream standards are entering more and more isolating situations. It's more and more difficult to create a community of support, a community of social support, a community of physical support. So then that makes you more at risk. So the personal cost then really goes up in terms of personal loss, divorce,

children who have emotional difficulties. It's real important that we begin to try to figure out ways to reconstruct community in a way that we get the best of what the old communities were. There's been a lot of dialogue about ways that middle class Black families can meet and create communities with working class Black families. What happened with the social mobility is that Black families of middle class moved out of the neighborhoods and the neighborhoods that they ended up moving into were geographically so far away. Those other systems of social support became removed.... So the same kind of distrust that existed between African American people and White at Reconstruction and into the 60s now exists between middle class African Americans and working class African Americans. Notions that you don't have my interests at heart. (JB)

I sit and think most of my generation, because we were part of that first group to be given opportunities, we probably gave up more than what we should have, trying to be accepted, trying to prove that we were capable. Blindly giving up everything and accepting a culture and a lifestyle that we really didn't want but we knew we had to in order to get that level of acceptability. We were doing it under the guise of making it better for those behind us. Now I can see, no we weren't. We were not making it better, because now we have already set up this false expectation and that's the only way it can be done and that's not true. (SW)

Summary of Learning Paths within the Societal System

The societal system included those political, social, cultural, and physical contexts in

which the women learned. Historical events and societal norms within this system impacted the learning paths within the family, educational, network, and personal systems.

These events afforded both new opportunities as well as established barriers for educational and leadership advancement for African American women.

Though racism was a constant, the women chose not to let it dominate their learning paths. They understood that they could and were obligated to succeed. Their methods for addressing issues of racism seemed to vary along generational lines. Those women in their late 60's through 80's tended to discuss the impact of racism from a perspective of fitting into the larger society through academic and professional excellence. Those women in their late 40's through mid 60's tended to emphasize the civil rights advocacy responsibility associated with their learning paths. Those in their 30's and 40's highlighted patterns of injustice within the societal, educational and institutional settings that affected their learning paths.

Though gender discrimination also occurred, the women tended not to identify such incidences within the direct educational and practice arena of occupational therapy. Gender discrimination that they did report occurred within the larger healthcare or educational context.

Summary of Learning Paths

Through their oral histories, the women revealed the learning paths that they traversed within their family, educational, network, personal, and societal systems to

achieve positions of prominence. Frequently these systems overlapped. The learning paths through each of these systems included experiential based learning, dialogue, and ethic of caring, and an ethic of responsibility. These sources of knowledge were similar to those identified in Collins' (1991) work, as described in chapter 2.

Each system's influence shifted throughout the life span of the women in response to the centrality of the activities within a particular system. These shifts occurred in relation to the women's developmental stages and the context in which the activities occurred. Each system provided support for, barriers to, and expectations resulting in differential access and restriction to positions of prominence.

The changing historical, political, social, and physical context of the societal system strongly influenced where, what, and how the women learned. Though varying in its manifestation and intensity, racism was a constant within this system. The stories about and responses to this context varied along the generational lines of the women.

Some of the messages the women heard along the learning paths were validating; others were negating. Consistent with the work of Johnson-Bailey & Cervero (1996) presented in chapter 2, the women needed to learn how to determine when to attend to, ignore, and resist specific messages. To successfully negotiate issues of racism and sexism, the women needed to judge when to employ acts of silence, negotiation, or resistance.

From messages received along the paths, the women learned to value education, respect wisdom, envision possibilities, maintain ethical standards, share what they had, and appreciate the power of the collective. They learned to think, negotiate, transcend

gendered roles, and attend to multiple environmental cues. They learned to celebrate their heritage, their self-worth, and their strength. Most important, the women learned that they had the potential and bore the responsibility to succeed and to lead. Most acutely they heard the message that they were to assume leadership responsibilities that addressed the care and social advocacy needs of others. As reflected in the stories presented in the personal system, the women internalized these expectations and accepted the personal costs associated with such responsibilities.

As previously stated, the goal of this section on learning paths was to illuminate their complexity and richness. In so doing, it emphasized the impact of the messages the women received on these paths, creating a learning-leadership interface.

The next section of this chapter examines this same interface from a different angle. It focuses on the leadership roles and styles that evolved over time and in relation to these learning paths. The examination of the interface from this second vantage point provides a more comprehensive understanding of the dynamic interplay between the learning paths the women followed and the leadership roles the assumed throughout their lives. It offers further insight as to why the women internalized, from the messages received along the learning, obligations to accept leadership positions and demonstrate leadership skills within socially constructed systems of support and repression.

Perspectives About Leadership

This section has two goals. The first goals is to profile the contours of the leadership the women assumed as they progressed along their learning paths and

practiced expanding levels of professional and community responsibility. The second goal is to examine how and why these leadership characteristics evolved in relation to the messages the women received along their learning paths. Such an examination provides cues as to how and why the women earned positions of prominence within and beyond the female-dominated profession of occupational therapy.

Contours and Qualities of Leadership

As revealed through their oral histories, the women held various leadership positions within education, health care, church and human service organizations. They began practicing leadership roles in their youth and accepted multiple professional leadership positions as adults. (See Appendix D). Rather than seek such positions for personal glorification or financial remuneration, they assumed them because of a recognized societal need. Rather than viewing learning and leadership as separate processes, they intertwined them, drawing upon advancement in one to stimulate progress in the other.

> I don't think that I'm a forceful leader so much as I'm an advocate for people who are disenfranchised, by trying to help them to become their own advocates.... I was asked to take the role of the advocacy coordinator.... It got me into learning... community organization, and advocacy roles, the involvement of the consumer. This is all before P.L. 94142...that came up through the federal legislation. I was part of that testimony only I never went to Congress myself at

the request of UCP (United Cerebral Palsy). I always found a consumer to send. They were, of course, just so dynamic....

I remember I made a speech... I was to sit at the head table as the keynote speaker but the wife of the national executive director came. So they asked me to relinquish my seat rather than one of the officers or the host people....That's rare that a keynote speaker is asked to relinquish the seat. I didn't think anything about it at the time other than 'Well, here we go again.' The table in the back, the very back, was the table without chairs. I think, again, this was divine intervention because I sat at the table that had no chairs. I just drew up one. All the people in the wheelchairs were [sitting there and] talking about their experiences and so forth. I just listened. I had this well prepared speech but I didn't have any case illustrations. I made these case illustrations based upon the topics that were discussed at the table.... After that [the people in the wheelchairs]... established their own advocacy project based upon the models that I was talking about. (ML)

Well, I think that I would like to say that I am a facilitator. What I'm always trying to do is to get people as involved as possible in the issues that they see that are important to them... keep reminding people to try to articulate what's important and the values around that. I try to support people in taking on more responsibility and leadership. Because I have so many things going on in my life, I don't really define myself by what I'm doing.... I like it, but it doesn't drive me. I don't need it to breathe. So, I think that I can step aside and make room for other people. (SI)

> The women assumed the leadership roles because of their personal belief in their responsibility and capacity to serve the educational, health care, church, and human service communities. They understood from the messages that they heard along their learning paths that it was not a choice but an expectation for them to take care of needs of others.
>
> [My husband and I] were in Chicago at the time that Dr. King was assassinated and also we were there when Malcolm X was assassinated.... There was this Woodline Association and there was a lot of work with that with housing, with employment. We were active in the Unitarian Caucus, the Black Caucus. I got money from the denomination and one of the things that was funded by this caucus was the work of Henry Hanson.... He did the television documentary on Eyes on the Prize.... [It] is really an oral history at the Civil Rights Movements, but it's not from the people in positions of power, but just the everyday people.... We [also] were very active [in] a community school. Initially it had been a Catholic school and then the community took it over and so I volunteered there for a while for about four years and it was a very... revolutionary school.... Everywhere we went we were always just very active in what was going on. (SI)

Their ability to lead was a result of an emerging rather than planned process. Nurtured by family, teachers, and community leaders along their learning paths, and motivated by a belief in their own capacities, the women practiced leadership skills in their youth. In high school, they became editors of newspapers, presidents of clubs,

winners of academic awards, organizers of church youth groups, class valedictorians, and star athletes. In college, they served as student representatives to University boards, Occupational Therapy club presidents, student representatives to the American Occupational Therapy Association, and officers in social service sororities.

Encouraged by messages they received from leaders and colleagues they met on the learning paths within their work environments, they expanded their leadership responsibilities and refined their leadership skills early in their professional careers. They assumed administrative positions, served on regional and national health care, educational, and professional committees, and presented at workshops and conferences.

> I became assistant chief, which is supervisor of student training. We had a large student training program and students came from all over. We had students who came from California, and Boston and of course the New York schools.... The New England Council invited people who trained their students, to come up to New England.... That's when I met Anne Henderson, she was in charge of the [occupational therapy program at the] University of New Hampshire.... I met Marion Crampton, who was in charge of psychiatry for the State of Massachusetts...They asked me to lead [a workshop] on problems students. (WE)

> Out of those meetings came some workshops that were created and teams of us went across the country and taught occupational therapists what we knew about evaluation.... At Lafayette Clinic, we took one whole year to create vocabulary, so that we could talk to each other and know what each other was talking about. We

> came from four different disciplines, special ed, occupational therapy, psychology and recreational therapy.... As occupational therapists, we hoped we were helping clinicians recognize the need to use objective measures as well as standardized measures when they could, that were appropriate....That was the beginning of systematic evaluation in occupational therapy. (LL)

As they advanced in their careers, having internalized the expectation from their family and community learning paths to care for the need for others, they assumed social advocacy leadership within the government, community, and higher education.

> I had a call from the central office at the VA hospital asking me if I were interested in being chief occupational therapist of the VA hospital. Well, that was quite a challenge, so I said, yes....I stayed there not quite a year and in spite of things, I was able to win the respect of the staff that was there....Then I got this call...[saying] that there was an opening in the main office, central office, and would I be interested in this job. Well, I got to thinking about it and I had gone as far as I could go in occupational therapy. I had been assistant OT or deputy at the VA hospital there in Tuskegee and now I was chief of the VA hospital in Washington. So, this was an opportunity to move. So, I did. That is when I got into really the field of rehabilitation. A lot of it was through Mary Switzer and her interview with me in Tuskegee.... She said, 'I would like for you to do some civil rights work for us. You had lived and worked in the South and you know where everything is swept under the carpet.' That is when I started with part of the Civil

Rights movement. I visited hospitals and nursing homes and different training schools to see if they were complying with Title IV....

While I was still with the social and rehabilitation service I became what they call an assistant regional commissioner and that was for Region 3, around this area.... I stayed in that job two years and then the government decided that they were going to do something about the Welfare Service. They had developed a family assistance program... They wanted a special task force to work out a plan for the training techniques and schedule of training for federal employees to help them work and improve their working conditions with welfare recipients. So this was a very special task force [that I headed]. (RB)

The first three years of the [Stanford Geriatric Education Center] project was involved with having workshops and conferences where the ethnic elders were brought to a setting and essentially asked to tell us what kinds of things they needed. What kinds of things were people missing in trying to provide help for them, particularly as related to cultural issues. In listening to what they had to tell us about what their needs were, and translating that into whatever theoretical backgrounds we came from..., whether it was nursing or physicians or whatever, and then turning that into curriculum. So the curriculum that we were creating [came]out of a combination of what we learned from the ethnic elders and what we thought we knew about providing health care and housing. (LL)

Having refined the ability solve problems, think critically, and network as they progressed along their learning paths, the women helped to advance the occupational

therapy profession. They contributed to its knowledge base, developed its organizational structure, and encouraged others to do likewise.

> You know, every time you read something or interact with people, or go to conference and hear people, you get a greater sense of what this profession can offer. Between the ’70s and the ’90s you got a sense that more minority involvement has gone on, but when I was coming along, I felt an obligation to the Black therapists. I have never said this to them, but to me there was an obligation to speak up, be seen, and act. Not just speak up and be seen, but speak up, be seen, and act. Therefore, I felt an obligation to try to present at conference, to try to write, to try to be involved in the organization, AOTA, as well as the caucus. Part of that truly came from being student chair, to take what I’d learned in that position and use it. You get a lot of rewards. People pat you on the back and say ‘good job’. I don’t need a whole lot. That to me is fine.... I couldn’t drag everybody that I wanted along with me, but I have dragged a few. I’ve encouraged a few folks to go to conference; encouraged a few folks to write. I will tell you that if you want me to review something, I’ll review it. I’ll give my suggestions on it. Knowledge only is knowledge if you pass it on. It’s not knowledge if only you have it. [It is] a self-defeating concept to have it and not pass it on. (PK)

> You have an opportunity to be with friends while you’re working [on AOTA committees]. A lot of things that I did kind of facilitated that. The biggy was the Research Advisory Council. That was 1978 while I was still at the University of Florida. I was appointed... the chair of that program. The idea was to try to create

> a vision for research in occupational therapy. There were a number of people who had that vision and I was very honored to be asked to do it. (LL)

Within their positions of prominence, the women primarily used a transformational leadership style they had seen modeled by their parents, community leaders, and educational mentors. They used this leadership style to provide the services needed, while concurrently facilitating both the growth of the individuals whom they supervised and the organization for which they were responsible.

> I think that it is really a belief. I believe in doing a good job where ever I am. For me the good job means always asking the question 'Am I giving the best service.' There's a quality component, but then there's an inclusive component too.... There's probably a kind of planning.... I like thinking about the possibilities.... I always have ideas. In fact my ideas are much bigger and broader than anything I can catch up with. I always know that I need to bring people in on my ideas. I don't even have the energy or the interest, if you will, to leverage my ideas unless I have people that will benefit from it.... It [gives] them an opportunity to be leaders.... We need to have a way to give people something.... My sense is that we always need to bring somebody else along with us. Not necessarily reproduce ourselves but just 'Are we doing the best?'... I don't like the term [boss].... In the old days the boss was the man, you know, kind of things and it had a lot of negative things to me. (SJ)

Believing in the power of collective talents, they networked people to identify and achieve objectives. They masterfully employed negotiation and diplomacy to confront

difficult issues, neutralize resistance, and reach consensus. As they had learned transformational leadership skills, they also learned networking skills over time from observing and dialoguing with their parents, community leaders, and professional colleagues.

> I can certainly be confrontational if I have to and sometimes you have to be, but I [do not] find that usually helpful. If I have to be, I try to keep it as limited as possible. [When] some people become confrontational, everything that you've ever done with them becomes part of the problem. Then it takes a long time to ever get back on even ground where you can work with that person. I try to keep it very focused and then work toward getting to a place where you can talk. 'Let's talk about it. Let me tell you where I'm coming from and I'm going to try to understand where you're coming from. Let me tell you what kind of result we need to work towards in terms of what the college wants or whatever, and how do we do that. How do we get there without your giving up totally on your behalf.' I think listening is just such a wonderful thing because if you really listen, sometimes you realize that what they're saying is not terrible. They have some points that you should really consider. Sometimes, I've really changed my own way of looking at issues by being able to listen to people that I really thought were totally in left field. I think that my father was able to help me with that. I think his real skill was in being able to meet people on the playing the field that was as level as he could get it, which was really hard many times. That's a tricky issue. (MS)

> [In] my career at the state system in Maryland [I was] both the director of the rehabilitation services department at Springfield, as well as the chief of the rehabilitation services for the Mental Hygiene Administration. [This] meant that I was responsible for the therapy cohort in the thirteen state hospitals. My duty there really was good because it allowed me to give input into policy, legislation. I certainly spent a fair amount of my time fighting for staff, fighting for raises.... I took fractional groups and made them into one working group so that the OTs, PTs, and ATs weren't fighting. They worked together. (PK)

. Having watched their parents, particularly their fathers, and having formed mentoring relationships with leaders in the field, the women brought to their leadership positions an understanding about systems, an ability to analyze organizations, and a capacity to attend to and connect multiple pieces to form a whole. They led with a sense of vision about what could happen.

> It's the spirit that drives leadership…. Anyone that makes a significant change...never [sticks] to the status quo, you won't be able to.... Leaders [have] vision, voice, and virtue. Vision is that larger vision of what is all this about, being clear about that vision and not being afraid of it. Voice is all those things..., in terms of practice or whatever you're doing, that [insures] you're the best you can be. …The things I read [help me] to keep my voice…. My voice is how I speak, how I put together, construct ideas. I use a voice in the classroom. The virtue piece has to do with that commitment to that vision, which doesn't allow you to stay silent, … switching to implement the voice…. The difference between

> the great leaders, that over time you see what they're able to accomplish….
>
> Sometimes spirit and passion has more to do with changing things. (JL)

Having learned from their mothers and select teachers, they concurrently attended to the personal and professional needs of each person, while maintaining high ethical and performance standards.

> On the ward at a particular time we had a patient who was dying. This was a young woman and they didn't think she should be dying. She had some condition, I don't remember what it was, but it was kind of a surprise to everyone. I could see that all these people were up on the ward waiting for her to die… I said, …'we've got to get these people down here into the unit and have a community meeting'…. Everybody came down who was treating this woman.... It was just the most healing place for everyone to be there and talk about it.... We could contain the whole community.... We were participating in the life of that community. (WS)

Sensitive to issues of cultural diversity, they prompted organizations and the people within them to recognize institutional prejudices and incorporate inclusionary practices. Strengthened by spiritual beliefs, and dialogue with Black women and other colleagues, they pressed for societal reformation, in spite of the barriers placed before them.

> When I am participating in any aspect, most especially with AOTA, but any aspect of being a professional, it's up to me to speak to the message of minority therapists, minority clients, minorities in health care. I feel that I have that

responsibility no matter what we're talking about, no matter what the title is. Even though I'm not there for that reason, they're going to get that part of me. (CH)

The other thing that I'm most proud of, has to do with using my Kellogg money to line up with the Scandinavia OTs. I was in the RA [Representative Assembly]. We had this whole thing around whether we were going... to make an AOTA statement about what was going on in South Africa and our disapproval of Apartheid…. [AOTA didn't want to] take a political position…. I used my Kellogg money and …met with the head of Swedish [OT organization]. The Swedes were going to pull out…[of] WFOT (World Federation of Occupational Therapists) [because WFOT also was not making a statement against Apartheid]…. The Scandinavian OTs wanted to be like the other health professions in saying we were against Apartheid. [I used my] Kellogg money [to] fly to… Sweden and met with their association and then went to Denmark and met with their association…. My intent was to assure them that they were going to get something positive from the U.S. OT association.… If they got us to make a statement against Apartheid, to take a political stand, they could be encouraged to go back to WFOT and get some action from WFOT. They had tried [the] year [before] and they were turned down.…What they gave me were original letters …. When I came back for our [RA] annual meeting… I had information to give support why it was okay for [AOTA] to [make the statement]….[Also] I was able to put together that and I had a statement from the American Public Health Association, having gone to their meeting. I brought that in to make people feel

safe, that we were not becoming a political organization. That it was going to do some good for WFOT in the long run and that this is how we could be supportive of the South African OTs who really are committed to keeping their system open but they're under this Apartheid system.… I felt [this] was a good way to send a very loud signal that we did not approve of Apartheid. We had an expectation that OT would be an open profession, regardless of color. It was someone else's resolution that triggered me to go do all that homework to push that one through. It was not my resolution, but

I was prepared to make sure we got something out of our own association, which I'm absolutely tickled and delighted it happened. (JL)

Part of the work that you have to do in organizations, has to do with helping them see how to get the tasks done and relate to the people who are doing the tasks, and also develop a vision for how the work can be done. A lot of my work really is around that. Some of it also helping an organization to create an environment where differences are acknowledged, dealt with, appreciated,... to utilize the differences that people bring. That preoccupies me a lot in the work that I do. I have been fortunate to work for very big companies, Fortune 500 companies.... Specifically, I do a lot of workshops. Some of the workshops that I do have to do with issues of race, gender, sexual orientation, all kinds of differences. A lot of it has to do with helping people both understand how differences operate in their own lives and how it operates in the lives of other people. When I think of diversity, I think of helping people look both at difference

> and at dominance because the intersection of those two is where people have difficulty relating to each other. In the worse form, it leads to sexism, racism, all the isms. When people are able to deal with difference and dominance very well, they develop a kind of confidence that allows them and allows the organization to be very proud. I think this is particularly needed now as we've become a more global economy. So a lot of my work now is beginning to focus on more global needs of companies. (WS)

Interested in empowering others, they mentored other health care professionals, students, faculty, and community advocates, thus continuing the mentorship they had received from community and professional leaders along their learning paths. Some of the women created support systems for students of color by connecting them to practitioners in the field. Others obtained grants to develop a support network for faculty of color who were embarking on the promotion and tenure track.

> In Virginia, we formed... a mentorship for our African American students because I realized the students needed to know who the Black OTs were in the state and also needed that support.... We had regular meetings.... I gave them a list of the Black OTs, so that if they had any problems in school they could at least call someone and ask, 'How would you handle this?' (MM)

> Virginia Commonwealth University, like many universities, was trying to recruit more Black faculty. They found it very difficult to find qualified Black faculty. Those who were hired usually had a very short list of publications.... We submitted a grant for a mentorship program for new minority faculty and it was

funded for a couple of years. The first year I was co-director. The second and third year I was the director of the grant.... We invited the [new Black faculty] to join the mentorship program which included a thorough orientation to the university system, because many of these new faculty had just completed their doctorates and it was their first faculty position.... We met with them frequently and supported them in their research efforts..... We hooked them up with certain faculty members who had a publication record.... We had a definite protocol they were to follow in order to become tenured faculty. (MM)

I think it is my responsibility [to mentor] and I love it. I have worked almost entirely in terms of education, my education jobs in White establishments with a few minority students. It was always interesting,... without any conscious effort on my part,... we would have maybe one to three minority students per class, and with the exception of one, each of them identified me as their thesis advisor. I don't think that it was accidental. I don't think that it has to do with, 'I don't want a White person because that person is white.' I think it is the students need and desire, 'now that I am at that level of synthesizing, I really like to do that with someone who can help me clarify, reinforce, validate, tear apart, perfect, do whatever. I think that someone who is more like me can do that better.' That is a very comfortable role for me....

I [started] looking at places to [talk] about OT out in the community, in terms of recruitment, high schools, career fairs and such. I went into the classroom and

> called the minority students out. We had in the class... maybe a total of six or seven. They felt so good. I picked them out.... They were just so pleased that I had identified them. They were so pleased that they were going to have an opportunity to talk to minority high school students. They were so pleased that they could talk about OT.... I don't know if it was acknowledged or [anyone] had identified them as having something special to offer just because they are minority therapists. I think they do have something.... There are still not very many occupational therapists of color. There just aren't. (CH)

Having learned from their family, educational, and networks systems about the importance of support systems, and believing it to be their responsibility to create such a system for Black occupational therapy students and practitioners at the national level, many of them either founded, held office in, or made substantial contributions to the Black Occupational Therapy Caucus.

> It started in 1974 when I was at Walter Reed. It so happened that the District of Columbia OT Association was hosting the OT conference.... That's when the Black OT Caucus started. We were talking and then they wanted to take donations, some dues. I said, 'Well, if you're going to take some dues, you have to have someone responsible that's going to keep that money and keep a record of it.' Somebody turned around and said, 'Yes, and you're it.' So I was the treasurer of that organization for ten years. I kept the money. It would meet at every conference and we would discuss the issues that were germane to Black therapists and we had goals and objectives. [They] had to do with recruitment, retention,

> getting OTs to be involved at the state and at the national levels.... There were four or five of them....
>
> Then I became president and I still tried to open it up and I did try to bring more structure to it. I developed bylaws and an election schedule.... During this time we also developed a scholarship. (ES)
>
> I was involved with it starting.... It was in its infancy then. In fact, I designed the logo for the News Line.... It was just some place from this whole community of therapists to come together and talk about what their accomplishments have been, things that were important to our students, and how can we support our students and help them be retained in university programs. It was this wonderful sisterhood. I guess there were a few guys, but mostly sisterhood of people who came together around, around common interests.... I've been involved in the Black Caucus here in Illinois as well. It has been very, very rewarding for me. I think that it is important because Black women in this profession and Black men as well, have had a different kind of experience and not always an easy experience. It's very, very helpful to be able to have someone to talk with who understands that and be able to share that with them. Also [it has been helpful] to be able to tackle some of the problems that have come up in terms of denial of access or new problems that we've seen over the years. (BT)

Though they believed in the value of the Black Occupational Therapy Caucus to support and mentor Black practitioners, as leaders within the profession they remained concerned about the forces which deter people of color from entering the profession.

Through the learning experiences within their societal, educational, and network systems, they were able to identify and frame these deterrents as reflections of institutional racism and classism.

> There are a number of Black students who don't make it through the occupational therapy curriculum in a lot of places. Many people think it's just because they lose interest or because they don't have the ability. A lot of them don't make it because it feels like a betrayal of what they know, to move from the community that they came from into this professional community and take on the trappings, the philosophy, the behavior, all of those things that we ask people to be and do as occupational therapists. For some students, it's just too big a step. They're afraid they'll lose their connection with their family, that they will lose their connection with their community. People will think that they think they're White. There are all those kinds of issues that some students are dealing with.... Yet, we have a culture, as occupational therapists that we expect people to buy into, that is a different culture than that which people came from. I think that the BOTC helps to bridge some of that. (LL)

> I think we've lost a lot of talented racial ethnic people through the ranks of OT going on at many stages.... I got lots of stories [from Black female therapists] in my dissertation about being discouraged from applying to OT. Grades not good enough, wrong kind of person. Being actually told you should go apply to recreation. You should go apply for elementary education.... Maybe OT is not right for you. I still hear those stories, being encouraged to leave. Mostly racial

> ethnic students. Once they're at work, being excluded from the core group and social activities. Never hearing about the meeting that they should have been at or hearing information the need of extra CEUs for your license. Just the information networks where you get so much in order to grow in your career. Many African American, racial ethnics feel they're left out of the group. So that resonates with our personal experiences. (JB)
>
> I think there are some larger social forces that are closing the pipeline off earlier and earlier. In terms of our own field, and it's too easy for us to look at it. A hopelessness, bad schools. The kids have the desire to do these things. They have the capabilities but there's so many barriers along the way for them to be ready to come into these institutions. When they get here, I see that the environments have different levels of toxicity.... There's not an environment that welcomes them. There are so many small aggressions. They sit [in class] and the faculty give the message that everything out of their communities is crack babies, unhealthy family systems, poverty. There's no acknowledgment about diversity or the talent that comes from that particular culture. It's so subtle. It is never blatant. (JL)

To minimize the impact of some of these transgressions the women also developed advocacy systems within the universities and clinics where they worked, in addition to those they have established through the Black Occupational Therapy Caucus. The women made it their responsibility to personally contact students and practitioners of color in order to provide guidance and support during the application process. As had

been constructed for them by their family members and other select individuals, the women created safety zones within the classroom and work environment where issues of cultural diversity could be examined and celebrated. They shared strategies for coping within the racial barriers with students and practitioners so that they could succeed.

> When I have a graduate student....sitting in my office, we start out talking about one thing and then we're talking about her isolation and how people don't give her, when they have to do group projects, a part that's of any substance. She's not asking for the easy part. She knows she's not going to learn anything if her part on the project is to do the bibliography and not being included. That's a deep hurt.... So am I going to teach her how to be silent? I don't think so. I'll teach her how to fight better at a low cost.... When I'm dealing with a student that's in absolute tears or a White student that's got to learn something from a Black faculty member, I'm very aware I'm teaching the people a lot of stuff. It is not just the Black students, but I'm teaching the White students something that they've never experienced before. So those of us in these predominantly White schools, we have other things that we're teaching also. (JL)

> [Suesetta] had a passion for the Black students, in terms of having organization to support them while they were in [OT school] because she knew how difficult it was for them coming into a White environment. She started the Black Students' Organization.... She always had time to have the students, once, maybe twice a year at her home. She would always have an elaborate spread.... It would be a buffet, and the kids would be all over her house sitting on her

> furniture.... She would always have black OTs in the community come in and speak.... So I always found that she was tireless. She always had this quiet passion for the black students and what their needs were in the environment to help them succeed. Then I heard from White students that she was doing the same thing for them. If White students needed money, and they did because they just couldn't get through, she'd take it out of her pockets and wouldn't tell anybody that she had done this. (KB)

As Black females, they recognized that some judged their leadership capacities by a different set of standards and that their success or failure impacted upon the acceptance of Blacks, females, and Black females by other individuals. The women understood that though some people in positions of power recognized the women's talents and accepted their leadership, others struggled to do so because of racial and gender biases. Some of these people accused the women of being too aggressive and dominating. Other individuals assumed that the women would be able to accomplish only mediocre results.

To cope with such charges, the women employed those strategies they had practiced along their learning paths. They analyzed the political context in which they were to lead and came highly prepared to the discussion tables. They gathered significant amounts of background information about the agenda items to speak from a position of expertise. As well, they opened up the agenda items for public examination. By using these strategies, they directed people to focus on agenda items rather personal prejudices.

> I went and I was interviewed. They asked me if I was aware that this was a Seventh Day Adventist Hospital.... One of their concerns was that the recreational

therapist, who was a male, he was not a Seventh Day, he was Mormon, I would be over him.... I would be his boss; that was a concern for them. I said, 'I wanted this to be a little of a two-way street. Before I would accept this job, I would like to have a meeting with the OT staff. I would also like to meet with the program director for the recreational therapists'....

So they gave me an opportunity to meet with them. I gave them a questionnaire.... I asked everybody to fill out the questionnaire.... They didn't have to put their names on it but I needed to know some things. Since I didn't know them and they didn't know me, they could be very honest with me.... Then we just spent the time sort of talking. I said, 'I want you to be clear that, I would not come here if there's one person who has put on there that they would have a problem with my being in the role of director. And too, I recognize, obviously there's some very hurt people here and I don't know what that's about. I am a psychiatric therapist and secondarily, I could do anything that has to be done in rehab. I consider that I'm a pretty skilled person.... I intend to be a very supportive person because I need people to be supportive of me.... I would hope that if I came here, I think that we would need to plan together. I'm not looking to change so much unless you're ready to change, in a way that you want to change. I don't like sloppy things.... I just need you to know a little bit more about who I am other than there is this Black person who is interviewing for the director's position.' I got a call that evening saying that they had all gone to the director and to the head of the hospital and that they were offering me the position. I said, 'Well I haven't

had a chance to look at the questionnaires.' They were like, 'Forget the questionnaires, they all want you to come.' (SJ)

I don't imagine any Black person who is in the process of accomplishing or has accomplished anything, saying that 'when people look at me they are reaching conclusions and making decisions that can affect all'.... That's an awesome burden. It can make you pretty angry. My accomplishments are mine, if I don't do well. That doesn't mean the person next to me or behind me is not going to do well. That's still a burden that we have. [If] the Black student, the Black staff member, the Black supervisor, the Black director... doesn't do well, [others will say] 'Well, the next student, the next staff members, the next supervisor, the next director, we'd better watch out about them being Black because they don't do so well in this job.' (CH)

One thing I do believe in, identifying the power source, being very clear about who has the power. Not pussy footing around that, but it's real.... In the jobs that I've had, I have deliberately recruited other Black therapists. I've made room for them and supported them. I've supported all the therapists but just because I know that, living in the society in which we live, you don't get into situation by yourself. I'd be a fool to be in any position of responsibility and not have other Black people around me. (SI)

For some of the women, the responsibilities they assumed within their leadership positions extracted a personal cost that impacted on their health and their families. Others

struggled with the tension between the definition of success within the professional arena and the community.

> There are all these personal costs, the cost of the burden to your family, some times there are health costs, trying to be successful according to somebody else's standard of what success is.... They're sometimes at odds with your personal standards of what's success. You have to reconcile both of those because you have an economic obligation to sustain your family. For African American women you want to reconcile keeping things stable at home and at the same time holding things together at work. Just like other women, we do it all. We don't just work at work. We come home and we take care of the children and we take care of the home and we take care of the community. We're doing a lot of care taking. We're doing multiple roles, so it's a juggling act all of the time…. The stories of the high executive women that commit suicide, how do you understand that? You can't gauge the kind of stress that's produced with trying to harmonize at home and at work.... The stories are there and they're not going to go away. I don't think in this society it is quickly going to happen where we're going to be able to reconcile across class and racial lines. It is just too big a gap to bridge. It has tremendous, personal, social costs. Tremendous. (JB)

Summary of Leadership

As revealed through their oral histories, the women assumed leadership roles because they saw it as their responsibility to serve. They were encouraged, and expected, by central people within their lives to do so. Through their leadership roles they put into practice those beliefs they had internalized and skills they had mastered along their learning paths. Rather than viewing them as separate processes, the women intertwined their learning paths with their leadership roles, benefitting from advancement in one to sustain progress in the other. It is through this interface that they were able to demonstrate the level and complexity of leadership that earned them positions of prominence within and beyond the field of occupational therapy.

Consistent with those modeled by their parents and community leaders, they assumed leadership responsibilities in multiple arenas to address societal concerns. These included educational and health care settings, the church, and the community at the local, state, and national levels.

They employed transformational leadership strategies to advocate for the rights of those to they served, facilitated the growth of the individuals whom they supervised, and concurrently critiqued and promoted the goals of the institution for whom they worked. While maintaining high standards for excellence, they remained mindful of the personal needs of individuals. Capable of using directive leadership styles, they tended to employ facilitory approaches that united disparate groups, created organizational structures, and solved

Astute to the political context in which they led, they opened up hidden issues for public examination. They skillfully displayed content expertise and employed negotiation to move forward difficult agendas. Vigilant to issues of discrimination and social injustice, they challenged institutions to create inclusionary working environments, while currently creating safety zones for people of color. Cognizant of the barriers African Americans confronted when pursuing professional career opportunities, they tried to provide additional guidance and support to such individuals. In addition, they tried to provide such services to other marginalized groups.

Through the expansiveness and quality of their leadership, the women earned positions of prominence at the state and national levels. However, for some, it came at a cost. Some of the women experienced tension between the culture of their heritage and that of the professional arena in which they practiced. Others paid a personal price in terms of health, family, and personal relations. In spite of these costs, the women understood that as talented African American females, they had the obligation to advocate for the societal needs of others.

Summary of the Learning Paths to Positions of Prominence

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The goals of this chapter were two fold. The first goal was to facilitate an understanding of the backgrounds from which the women came that led to the positions of prominence that they attained. To this end, this chapter provided a group summary of their demographics, family composition, educational levels, and leadership positions.

The second goal was to examine the dynamic interface between learning and leadership that occurred throughout the life span of the women. To achieve this goal, the chapter examined how the learning paths prepared the women to assume positions of prominence and how their leadership roles and styles evolved from messages they received along the learning paths.

Specifically, this chapter revealed the richness and complexity of the lifelong learning paths the women traversed that led to positions of prominence. It emphasized the impact of the messages the women received on these paths, enabling them to practice leadership roles at an early age and to attain positions of prominence within socially constructed systems of support and repression. It described the learning paths as they occurred within five themes that emerged from the in-depth stories women shared. Conversely, it highlighted the leadership practices, fueled by belief systems formulated from lessons received along the learning paths. It examined the leadership roles the women held and the leadership qualities they displayed to fulfill their obligation to advocate for the societal needs of others. To supplement this examination, the chapter referenced appendixes that outlined the educational and leadership accomplishments of the women and the educational and work achievement of their family members.

The next chapter, Chapter 5, offers an analysis of the learning paths to positions of prominence for this select group of African American women. The intent is to understand the dynamics of their lifelong learning and leadership process. This analysis provides an additional resource to both substantiate and expand upon those emerging studies about African American women described in the literature review in Chapter 2. As stated by

Collins (1998), research about African American women stands at a pivotal point. Scholarly studies need to shift their emphasis from a critique of those social structures that objectify African American women to include a formulation of theoretical constructs that highlight African American women as agents of their own lives. The information gathered from this study hopefully contributes to that process.

Chapter 5

ANALYSIS AND CONCLUSION

The purpose of this chapter is to present an analysis of this study's findings and thus contribute to an understanding of the learning paths that led to positions of prominence within a predominantly female, Caucasian profession for a select group of African American women. Specifically, the analysis seeks to understand the processes by which these women learned and developed throughout their life span; the personal, family, and societal expectations and support systems they experienced as well the opportunities and barriers they encountered during their life span; and, the strategies they employed to succeed in their educational and multi dimensional career paths.

To accomplish this goal, this chapter presents three visual sketches for conceptualizing the learning paths through the five systems as described in Chapter 4. It then offers an analysis of the learning paths that led to positions of prominence, followed by a corollary analysis of the leadership contours that evolved from the learning paths. These complementary analyses offer a multi-perspective interpretation of the dynamic nature of the learning-leadership interface as manifested throughout the lives of the women, strengthening the conclusions of the study. These analyses are grounded within the studies about African American women's learning and leadership that were presented in Chapter 2. Chapter 5 then poses recommendations for future areas of research and concludes with a summary.

Framing the Analysis

Prior to analyzing the findings, it is important to reiterate that this study differs from other studies about African American women's learning and leadership in several, critical ways. Many sociological studies about African American women tend to objectify and blame them for the multiplicity of struggles they confront, rather than view them as agents of their own lives within socially constructed systems of racism. These studies tend to examine the lives of African American women from Eurocentric perspectives and in relation to the lives of White males from privileged environments (Collins, 1998). In addition, these studies tend to focus on those women who live near the ends of the socioeconomic ladder, that is, those who live near or in poverty and those who hold executive positions. Such a focus, without concurrent attention to those who live between these polar ends, results in skewed perceptions about the heterogeneity among and capacities of African American women. Specifically, such a focus portrays them either as failures within society or exceptions to the rule (Collins, 1998).

As revealed in the literature review in Chapter 2, those studies about African American women conducted by Black feminist thinkers who challenge the assumptions within such a paradigm, tend to examine learning and leadership as separate entities or from a specific segment of time within the life span of the women. Those studies that specifically address African American women's leadership tend to concentrate on those women who work as professionals within male dominated professions, direct community agencies, or hold deanships and presidencies within higher education. Those studies that

examine the lives of African American women across their life span tend to emphasize their struggles and triumphs within socially constructed institutions of racism rather than the learning-leadership interface (Collins, 1998).

In contrast, this study endeavored to position the women as agents of their own lives, situated as leaders within a predominantly White female health care profession. It explored the life of women who lived within racially segregated and formally integrated working and middle-class communities, and practiced as health care professionals rather than those who live at the economic margins. Instead of addressing learning and leadership as separate entities or within at a specific period of development, this study intertwined the themes and examined them as they emerged in relation to one another throughout the life span of the women. Further, it included women from several generations and from multiple regions of the country, rather than women only from a particular age group or geographical locale. What united the women was their attraction to and success within the White female-dominated profession of occupational therapy.

By so contextualizing the study, it explores the lives of African American women from a perspective not formerly investigated. It reaches conclusions that contrast with those postulated from Eurocentric perspectives and supports those articulated from post structural and Black feminist thinkers. It serves to expand the limited recorded knowledge about the lives of professional African American women, providing additional resources for meeting the challenge proposed by Collins (1998) to develop theoretical constructs about African American women from their lived perspectives.

The following section begins the analysis of the findings of this study to support its conclusions. As outlined earlier, it begins this analysis with visual sketches of the learning paths that led to positions of prominence.

Visual Sketches of the Learning Paths

The following three figures provide visual sketches of the interconnected learning paths described by the women. Figure 1 depicts a specific moment of time in the life of each of the women as influenced by the family, educational, network, personal, and societal systems identified in Chapter 4. Figure 2 provides a visual concept of a learning path through a particular system. Rather than follow a straight projectory, the learning path weaves through twists and turns, incorporating varying and contradictory messages, spiraling to more complex levels of knowledge. The learning path within one system transverses and unites with paths in other systems. Figure 3 depicts the life span of each of the women within the five systems. These systems interconnect in varying combinations throughout time.

As described by the women, the family system depicted in the sketches included immediate and extended family members that were biologically and culturally determined. The educational system included formal and other educational opportunities through the church, community, and professional arena. The network system expanded from the family units, church, community, educational institutions, and professional associations to which the women belonged, to create a web of people who provided

additional learning opportunities. The personal system included the cognitive, physical, social, and psychological capacities, as well as the belief and value schemes of each of the women. Finally, the societal system included the historical, political, social, and physical contexts in which the women lived.

[Insert Figures 1, 2, and 3 about here]

As expressed through the stories of the women, these systems overlapped. The degree of overlap was specific to each African American woman. Though the sketches depicted each of these systems as approximately equivalent in size, their size, and thus their degree of influence was specific for each woman. For some of the women, the learning paths within their family remained the dominant source of influence. For others, the network, educational, personal, and societal systems blended with the family system in varying combinations to exert differential influence on the leadership roles. As suggested by the curved sides of the systems, the consistency of influence from any of them also changed throughout the life span of the women. For example, at one moment in time, the network system may have exerted the most influence; at other times, it may have become less influential.

Each of these systems provided support for, barriers to, and expectations upon the women. The greatest amount of support and expectations came from family members and select individuals within the educational and network systems who celebrated the talents and worth of the women, challenging them to provide service to others. The societal system, as it influenced society's beliefs and customs, erected the greatest barriers in the form of institutional racism, and to a lesser extent, sexism.

As revealed through their stories, the women held differential positions of privilege and restriction within each of these systems. Their positions shifted through time, in relation to the fluid activity within each of the systems, and to the amount of authority afforded to or imposed upon the women. As the women gained recognition for their talents and respect for their leadership, others afforded them more authority. However, this authority was often couched within issues of race and gender, demanding the women to excel in order to be perceived as competent.

Though the personal system is located in the center of the sketch, in actuality the life stories of the women suggested that its size and placement within the cluster of systems differed for each of them. Many of the women articulated that the needs and expectations of others superceded their own. In such situations, the women understood that their success or failure affected those they represented, particularly members of the African American community. They also understood that it affected future generations. The ends of each system remain open to reflect their dynamic nature, as well as historical factors that predisposed what, where, and how the women could learn.

The arrow emerging from the cluster of systems spirals and changes in width to reflect the leadership that evolved from the learning paths. It reflects the restrictions and supports each woman experienced as she advanced to positions of prominence through the leadership quality and style she demonstrated. It reflects the forward direction of the leadership, stemming from personal capacities and sustained by visionary goals.

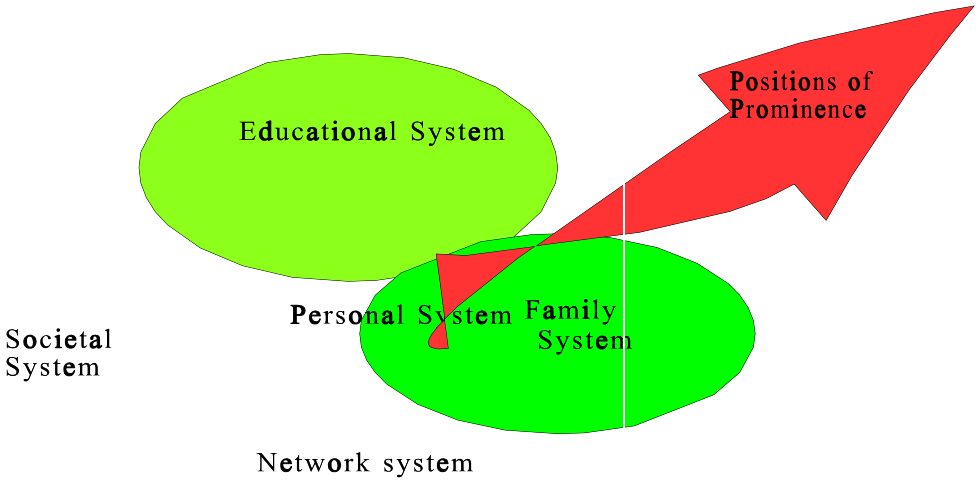

Figure 1
A Temporal Slice of Systems Influencing Learning Paths

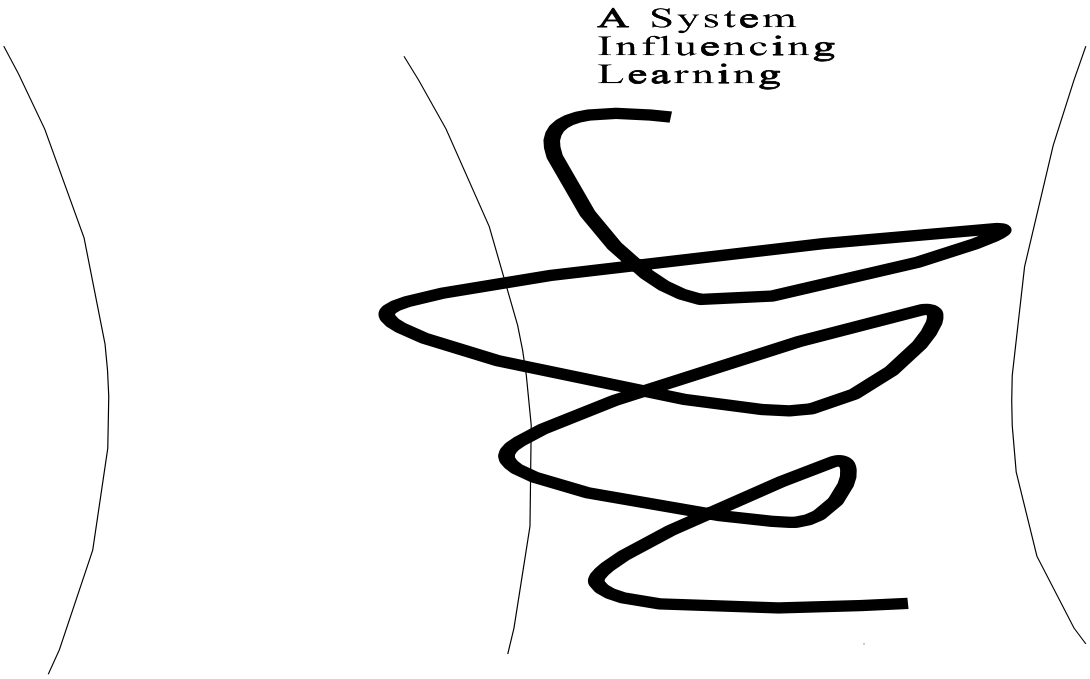

Figure 2
Learning Path Traversing Through a System

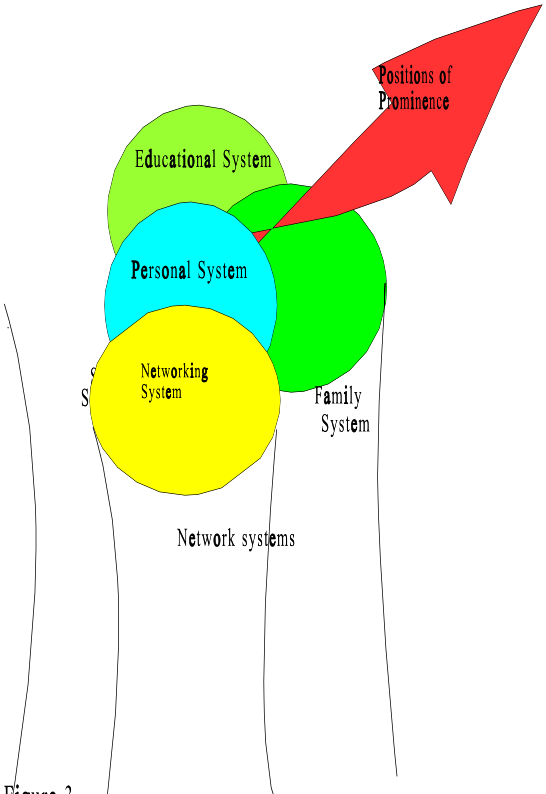

Figure 3
Systems Influencing Learning Paths Through Time

The first objective of the sketches is to capture the polyrhythmic complexities of the learning paths of the women and the leadership that emerged from them. The second objective is to represent the similarity and uniqueness of each of the stories that resulted in multiple positions of prominence within and outside of the field of occupational therapy. The next sections of the chapter offer more in depth analysis of these themes.

Analysis of the Learning Path

This section analyzes the importance of the learning paths and the content of their messages to prepare the women to fulfill and sustain leadership roles. To substantiate its conclusions, its findings are linked to studies about women's and African American women's learning presented in Chapter 2.

An Examination of the Learning Paths as Revealed Through the Oral Histories

Merriam-Webster (1991) defines path as a "trodden way,... a course, a way of life, conduct, or thought,... a continuous series of positions or configurations in [a]...process of change,... a line of communication" (p. 862). Within this definition, the learning paths upon which the women trod may be viewed as a series of learning configurations, connected together to form a way of behaving and thinking, a way of living which led to positions of prominence. As suggested through their oral histories,

these series of configurations occurred in multiple arenas of the women's lives, overlapping to refine belief systems and skills for providing service to, caring for, and empowering others. The arenas included those associated with their family, educational, network, personal, and societal systems. The manner in which the women demonstrated these belief systems and skills led to leadership roles and, eventually, to positions of prominence in occupational therapy.

Lines of communication with significant people in these systems guided the women through the twists and turns of the learning paths, sometimes by creating bridges for forging the streams, sometimes by erecting barriers to deter progress. Bridges emerged in the shape of human support, resources, and opportunities. Barriers originated from racial, and to a lesser extent, gender biases.

The family system conveyed critical messages about the worth of each of the women, the richness of their ethnic heritage, their capacity and obligation to excel, and their responsibility to advocate for the needs of the larger community. The family system did so by giving meaningful, concrete objects to the women that symbolized these messages, such as the Black doll and doctor kit described by BT in Chapter 4. The families created access to human role models and learning resources, stimulating the creative talents and intellectual capacities, providing structure, creating safety zones for growing and developing, and demonstrating, though not necessarily discussing, strategies for both recognizing and dealing with racial negations. They modeled leadership strategies for simultaneously attending to the person, the task, and the environmental context. They created and supported early leadership opportunities

for the women, delivering clear messages as to the kind of person they could and could not become.

The educational system transmitted both messages of support and restrictions that varied in intensity in relation to the environmental context in which they occurred. All of the women received messages of praise about their academic talents. All received encouragement and guidance from mentors, educators, or community and church leaders for developing leadership skills and belief systems. To varying degrees, these messages concurred with those received from their family units. In contrast, the women also heard subtle to blatant messages that negated their academic talents and career potential because they were Black females. The maid story shared by CH reflected this negation. They were expected to work much harder than their White peers to have their efforts evaluated as mediocre. Some were encouraged to consider trade schools and domestic jobs, rather than college and professional careers. Belief systems nurtured by the family members became essential for preventing the internalization of such messages.

As did the educational system, the network system transmitted conflicting messages. Those supportive networks that extended from family and educational systems exposed the women to possibilities beyond stereotypical domestic jobs for African American women. They created circles of communication for exploring dreams and validating achievements. The Black Occupational Therapy Caucus provided such a network within the White, female arena of occupational therapy. It afforded spiritual respite and sisterhood. It created a safe platform from which to risk challenging the

occupational therapy association to address issues of racism. Through its officer positions, it allowed for the advancement of leadership skills. Those professional and community networks that were not as supportive taught the women how to read and negotiate through the political context to achieve those objectives which were paramount. The women learned to use the strength they gained from the supportive networks to sustain themselves in those networks which were more caustic.

The personal system created internal lines of communication for the women to weave together messages transmitted from the external environment with those they generated themselves. The personal system afforded an opportunity for the women to explore their own beliefs about their heritage, talents, spirituality, interests, and obligations. They allowed the women to develop an internal sense of discipline, motivation, social justice, and professional ethics. As conveyed by JL in Chapter 4 when describing her role within occupational therapy, the personal system allowed the women to construct their own image of visionary leadership and expectations about social advocacy.

The societal system relayed contradictory communications about the rights and privileges of all people and the limitations of women and people of color. As illuminated by SW and JB in Chapter 4 when they described their higher education and professional career tracks, societal systems afforded new access to education and new forms of societal constrictions. The societal system taught the women both the need for caution and for activism to protect themselves and members of their broader communities from stings of racism and sexism.

The messages from all of these systems blended together to prepare the women to enter into multiple leadership roles. The application of Merriam-Webster's (1991) definition emphasizes the complexity and time trodden nature of the learning paths to positions of prominence. The next two sections continue this emphasis. These sections endeavor to link the claims of this study with those found in other studies about women's and African American women's learning.

An Examination of the Learning Paths in Relation to Studies about Women's Learning

Studies about women suggest that themes of mastery, voice, authority, and positionality resonated within their learning opportunities, resulting in bi-directional influences of the women and external, environmental factors upon one another (Maher & Thompson-Tetreault, 1994). This current study expands upon the work of Maher and Thompson-Tetreault (1994) by elucidating how the capacity for mastery, voice, and authority developed over time along multiple, intertwined paths within family, educational, network, and personal systems. It highlights how positionality of the African American women along those learning paths, in relation to societal norms, impacted on their positionality, voice, and authority within leadership positions.

As revealed through their oral histories, the mastery the women achieved in their learning reflected a pooling of cognitive, emotional, spiritual, and experiential knowledge from all five systems. Using knowledge gained from these experiences, they developed

the capacity to examine the complexity of the issues they confronted in their leadership roles from alternative perspectives. Based on beliefs they generated within their personal systems and validated by

in concert with others, to construct multifaceted dimensions of understanding and enact organizational change.

Within the constructs of societal events and norms, race and gender created possibilities and limitations for the women to shape their voices. Within these same societal contexts, the educational levels, thinking capacities, political astuteness, and bicultural communication skills of the women directed the amount of authority they could achieve within their leadership roles. Their position as talented Black women in the predominantly female, Caucasian profession of occupational therapy created intersecting positions of privilege and exclusion, obligation and restriction. Frequently, these intersections went unnoted, though they were perpetuated by members of the profession, both individually and as a whole. In spite of the tensions at these points of intersection, the women remained committed to the principles of the occupational therapy profession. Rather then turn away from the profession because of these tensions, they acknowledged its strengths and limitations, and publicly worked within its parameters. Carefully within the public arena, and more openly within the private arena, they advocated for a shift in the positionality of people of color within its ranks.

An Examination of the Learning Paths in Relation to Studies about African American Women's Learning

In addition to these factors that shaped learning for women in general, studies conducted by Black feminist scholars examined other factors that shaped where, how, and why African American women learned. This current study concurs with and elaborates upon the results of several such studies described in Chapter 2.

In her work, Scott (1991) examined how African American women learned habits of surviving that were unquestioned and transmitted through actions from one generation of female family members to the next. This current study highlighted that these women also received such messages from their fathers and important family members. Often unspoken, the messages conveyed how to survive, sustain strength, have a sense of control and hope, and assume responsibility for the care of others. Rather than continuing the pattern of unquestioned acceptance, some of the women in this study actively engaged in discourse with their daughters and female students, sharing strategies for assessing the benefits and costs of these habits.

In her study of African American women who held presidency positions, Robinson (1996) described that they (a) recognized their potential for learning and leadership at an early age; (b) received strong motherly guidance; (c) were committed to lifelong learning; (d) learned through a connectedness to one another, to mentors, and sororities; and (e) developed political astuteness and strong interpersonal skills. This

current study, in reaching similar conclusions, also elucidated the importance of life long learning paths within interconnected systems to achieve and sustain positions of prominence. It demonstrated the importance of developing bicultural communication skills, skills learned through time by observing and judiciously applying those communication strategies exhibited by family members and select community leaders. It identified that, in addition to strong motherly guidance, strong guidance from fathers, male care givers, and select community leaders was essential for developing a repertoire of leadership skills and for sustaining the women through societal negations to achieve positions of prominence.

Consistent with the works of Gostnell (1996), this current study concluded that learning paths of African American female leaders were filled with complexities and contradictions. Racism, classism, and sexism were constants but not excuses. Reality combined past and present, requiring attention to the margins and the center. Similar to those of Mattis (1995), this study found that the women were educated to value spirituality and the meaning it gave to the learning processes. Expanding upon the works of Gostnell (1996) and Mattis (1995), the current study further illuminated how the women used messages of support from one system to shield themselves from messages of negation in another. For these women, messages of validation from their family systems and supportive networks associated with them remained paramount for discriminating between the mixed messages delivered from other systems. Environmental astuteness and political savvy were essential for strategically selecting among the coping mechanisms of silence, negotiation, and resistance identified by Johnson-Bailey & Cervero, (1996) to

address racism and sexism in the learning, work, and community

environments. Spirituality provided a call to action, fueling and sustaining their social advocacy efforts.

As identified by the women in Collins' (1991) work, the women in this study demonstrated the importance to the women of knowledge gained from: multiple, interconnected concrete experiences; the use of dialogue in assessing knowledge claims; an ethic of caring for all members of the community; and an ethic of personal accountability for their actions, beliefs, and work productions. In contrast, the women in this study also emphasized the importance of acquiring knowledge from formal texts and earning higher education degrees. Such knowledge and degrees quenched a personal thirst for knowing, opened access to career and leadership possibilities, and provided a foundation upon which to establish one's authority and voice in an environment of tenuous positionality. Not satisfied to absorb knowledge unquestioningly from texts, they critiqued its content, blended it with knowledge gained from other sources, and generated new knowledge within the field of occupational therapy. They used such knowledge to challenge institutional practices and empowered others to find their voices. They understood that the knowledge paths they forged affected the learning paths upon which other African American females could stride.

Though not directly articulated by them, the women also elucidated through their stories that they chose the field of occupational therapy because it validated this combination and generation of knowledge based on texts, experiential wisdom, dialogue,

an ethic of caring, and an ethic of responsibility. It combined their interests in arts, science, humanities, and health care. It afforded them an opportunity to use their creative talents and cognitive capacities to attend to and empower others through self-advocacy approaches. It provided a professional forum for legitimatizing their voice, strengthening their positionality within the health care community, and adding to the authority of their leadership. The next section expands upon these conclusions, presenting a further analysis of the leadership contours, as they evolved from the women's learning paths.

Analysis of Leadership Characteristics

Because of personal, family, and selected community beliefs in their ability and responsibility to excel, as well as the quality of the behaviors and thought the women demonstrated along their learning paths, they were encouraged to assume leadership positions. Specifically, they were encouraged to assume roles that addressed social advocacy concerns in education, the community, and the government. Careers that started with and emanated from occupational therapy allowed them to meet these obligations. Because of their leadership capacities, these careers led to positions of prominence at the state and national levels, and for a few, the international level.

Reared to care for the needs of the individual and the group, and to advocate for societal changes, the women combined those ways of thinking, caring, and doing modeled by both their male and female caregivers. Themes of creating, building, and nurturing permeated their stories about leadership. They were able to envision

possibilities beyond those which were immediately apparent. They used a transformational leadership style to facilitate direct participation, promote individual empowerment, and stimulate organizational growth. They led with a sense of assertiveness, independence, and personal confidence. They demonstrated creative and complex reasoning skills, simultaneously attending to the details of an issue or project, the context in which it was situated, and the needs of those working on it. As identified in Chapter 2, Jones (1992), Parker & ogilvie (1996), and White (1990) proposed that such a set of skills reflected the intertwining of traditional male and female characteristics, an intertwining consistently manifested by African American female leaders.

In addition, they learned from their families, community leaders, and peers to generate networks of people and services to develop new solutions and achieve mutual objectives. Within these networks, they validated the worth of each person, while currently holding each person accountable for his/her actions. They took calculated risks and campaigned for themselves and those for whom they were responsible.

As had been demonstrated by their parents and professional mentors, they modeled excellence and adhered to a high standard of professional ethics. They tended to be supportive and nurturing in their interactions, though they also could employ direct confrontation when such skills were necessary. Having learned from experiences within the multiple learning systems to be politically astute, they used negotiation, developed cohorts of support, and displayed mastery of information to reduce the barriers of resistance so that they could move important agenda forward. They created concurrent formal and informal communication channels to keep issues public, reduce racial and

gender-directed railroading of projects, and sustain focus on the central objectives.

As they advanced in their careers, they created more learning opportunities and network systems for themselves and others. They worked to obtain educational and other resources that enabled those around them to advance. In turn, they were afforded more leadership responsibilities. Opportunities and expectations for more public leadership beyond the occupational therapy profession reflected both a pressure from those external communities as well as internalized expectations.

They did not force their leadership onto others but accepted leadership based on a sense of responsibility to society. They did not view their own leadership as a self-directed path but rather an emerging process generated by a commitment to attend to those tasks which could make a positive difference for others.

Having realized along their learning paths that society would judge other African American people by their success or failures, they felt a responsibility to the larger group. Because of their talents, the women held themselves more accountable to succeed for the African American community. The women understood that while some within society respected both their professional talents and cultural heritage, others respected them as talented individuals only when viewed as separate or "de-raced" from their biological and cultural heritage. Other people could not offer even professional recognition because of racist beliefs. In spite of these occurrences, the women did not permit racism to dominate their lives or diminish the goals they were endeavoring to achieve.

Given their unique social location within the dominant culture and cognizant of tensions between their culture of their origin and the culture of their profession, they

served as cultural brokers. Advocating for access for people of color, they educated the dominant members of the occupational therapy profession and other health care and service agencies about the contributions such people could make. As suggested by Bell (1990), they modeled bicultural communication skills, guiding African American students and practitioners to develop self-advocacy mechanisms for negotiating through color barriers. As had been afforded to them along their learning paths, they created zones of safety where they and other African Americans could find spiritual support, respite, and validation, where they could discuss issues from perspectives that they could not within the larger social structure of their profession arenas.

In addition, the women spurred people of color and others with disadvantages to create their own support networks and political voice. The women desired to empower others to achieve their own paths for success rather than be constrained by dependency models which maintained the women in positions of power. They accepted the obligation to mentor children within their families and communities so these future generations could have models for dreaming about and skills for actualizing their own potentials.

Consistent with the work of Gilkes (1991), they carefully balanced the demands of membership in the occupational therapy profession and other professional associations with a critical analysis of the practiced ideologies of those professions, particularly when those ideologies were grounded in dominant cultural beliefs that devalued or misrepresented the capacities of minority cultures. Consistent with the work of Gilkes (1990) about African American female community leaders, the women in this study shared that membership in Black sororities and networks provided important social and

professional connections for developing leadership skills and for addressing educational, professional, and social service concerns. However, in contrast to Gilkes' (1990) work, this current study found that the women had to consider whether membership in an Black network, specifically the Black Occupational Therapy Caucus, balanced the cost of potential conflicts, restrictions, and surveillance it would create for them as members of the larger profession. Though the occupational therapy profession was founded as a profession that valued the worth of all, the women articulated that it did not recognize its own exclusionary practice. Thus, it was important for the women to network with other groups in the association, particularly with those who held authority in the organization. Such networking afforded access to resources and opportunities that otherwise may not have been as available to the women because of the color of their skin.

Consistent with the finding of Talley-Ross (1991) the women in this study articulated that their ability to sustain leadership responsibilities in occupational therapy and other professional arenas in spite of racial and gender tensions stemmed from parental promotion of optimism; parental and self-promotion of self-reliance; church affiliation and positive self-definition; effective coping mechanisms; and, the ability to remain focused on the broader issues. This current study demonstrated how such messages were learned. In addition, it found that most of the women continued to receive parental encouragement throughout their adulthood. Support from their children, spouses, and partners also sustained their leadership endeavors. The women did not rest on their accomplishments, but perceived themselves to be in the process of becoming, open to the next challenge that confronted them. To fulfill this expansive

commitment to society, some of the women paid a cost in terms of personal health and family relationships.

Conclusion

The purpose of the study was to understand the learning paths of twenty two African American women who held positions of prominence within a predominantly Caucasian, female profession. Using an oral history approach to gather thick rich, descriptions, it explored: the processes by which these women learned and developed throughout their life span; the personal, family, and societal expectations and support systems they experienced as well the opportunities and barriers they encountered during their life span; and the strategies they employed to succeed in their educational and career paths. It provided information to advance adult education research about African American women as learners and leaders. As well, it provided information to advance the practice of adult education as it is related to the professional development of African American women.

Conclusions Related to Adult Education Research

This study expands adult education research about African American women in five important ways. It highlights (a) the complexity and interconnection of their

learning paths; (b) the importance of the messages learned along the paths; (c) the interface of learning and leadership through their life span; (d) the characteristics and obligations inherent within their leadership roles; and (e) the constants of racism and sexism within the lived experiences.

Through their collective stories, the study illuminated that the learning paths of the women occurred within family systems, educational systems, network systems, personal systems, and societal systems. The study demonstrated that these systems overlapped and differentially influenced the women at various times in their lives as they advanced to positions of prominence.

The study also emphasized that though the women received contradictory messages along these learning paths, those that they heard most clearly originated from their family systems and supportive people within their extended network and educational systems. These messages verified the self- worth and talents of the women, celebrated their heritage, and created possibilities for dreaming about whom they could become. They placed expectations upon the women to excel and to provide service to the community.

To deliver such messages, family members and supportive people within the community, church, and educational arenas created zones of safety where the women could develop; accessed human and material resources so the women could learn; and extended mentoring opportunities so the women could refine leadership skills. The women learned from such individuals how to navigate around barriers of resistance to remain focused on those goals which they wanted and were expected to achieve. Positive-

self definition, as a result of parental rearing practices and networks with community leaders, enabled them to create effective strategies for coping with those racial and gender negations that festered within the larger society.

The study also emphasized that these learning paths were not constricted to a particular period of time but transversed through the life span of each of the women. Dynamic in nature, they provided both a foundation upon which to build future knowledge as well as a platform from which to critique previous understandings. Knowledge, values, and skills gained in one system were used to enhance or refute those from another system.

The collective knowledge, values, and skills gained from all of the learning paths enabled the women to develop and practice the qualities of leadership necessary for the positions of prominence they held. Messages they received along the learning path taught the women how to demonstrate transformational leadership skills that encompassed direct participation, empowerment, team building, establishment of networks, risk taking, and vision creation. The women internalized moral beliefs that enabled them to model high standards for achievement and professional ethics. They learned to attend concurrently to the needs of the individuals, the collective talents of the group, the details of the issues they were addressing, and the political context in which they occurred. Having observed family members and other leaders within the education, work, and church communities, they developed the ability to skillfully employ negotiation, create cohorts of support, and display mastery of content to press forward important social advocacy agenda. They understood how to be bicultural, as well as function as a cultural broker between Black

and White people within their work, community, and educational environments.

The women assumed leadership roles because of self- imposed and external expectations about their responsibility to advocate for the betterment of the occupational therapy profession, the African American community, and those in need rather than for self-advancement. Personal characteristics that fueled their ability to lead included: an appreciation of cultural roots, family values and personal capacities; a dedication to educational pursuits; a willingness to accept challenges and cope with adversity; an ability to prioritize and sustain focus to goals; a commitment to professional and community service; a capacity to attend to multifaceted factors; and an ability to envision new opportunities and implement effective strategies.

Because of the talents they displayed in their leadership roles, they advanced to positions of prominence at the state, national, and international level in educational, health care, and government arenas. They viewed their accomplishments as a natural evolution of events fueled by their will to succeed. Some paid personal costs.

This study also reiterated that the women understood that racism was a constant along their learning paths and within their learning leadership roles. Sometimes it was subtle, sometimes more blatant. Though sexism did occur along their learning paths and within their leadership roles, the women tended not to emphasize it. Within the confines of the occupational therapy profession, they were protected from its stings. In spite of their occurrences, the women did not allow either issues of sexism or racism to dominate their lives nor deter them from accomplishing that which they perceived needed to be done.

Conclusions Related to Adult Education Practice

This study also expands upon adult education practice by making explicit factors that contribute to the success of African American women within the learning environment. In so doing, it challenges adult education practitioners to re-examine the dominant assumptions and teaching methodologies based on Eurocentric perspectives. These factors include (a) the importance of early and sustained support systems; (b) the value of networks with individuals who share similar ethnic heritage and expectations; (c) the necessity of consistent inclusionary practices within the learning environment; (d) the primacy of communal educational objectives beyond mastery of subject material; and (e) the centrality of communal rather than individual learning and leadership endeavors.

The women identified the significance of establishing visible support systems early in the educational and career tracks, especially within a profession not aware of its insensitivity to the heritage and unique needs of African American women. The women described the importance of these support systems for creating safety zones where students of color could receive validations about their talents as well as their cultural heritage; where they could label and formulate strategies for dealing with racism; and where they could examine the tensions between the expectations of their families and those of the profession. They identified the importance of incorporating inclusionary language into the texts, case studies, and class discussions, language that neither perpetuated societal prejudices nor marginalized the life experiences of students of

color. As well, the women elucidated the merit of networks that were astute to the professional development needs of African American practitioners and students.

As a consequence of their own professional learning experiences within the Caucasian, female dominated profession of occupational therapy, the women united to form Black Occupational Therapy caucuses. These caucuses allowed them to bind their common threads, erect platforms for strengthening their position within the established structures, and infuse their collective voices with additional authority.

Most importantly, through their stories, the women brought to the forefront fundamental aspects of learning for African American women that challenged core self-directed and andrologogical assumptions of adult education. These aspects included the communal objectives and nature of learning. The women articulated that they attended to the needs of the community, for these needs superceded their own personal need satisfaction and glorification. The women understood that their ability to socially advocate for others, particularly those within the African American community, depended upon their education level and thus, the leadership level they could achieve. Education and leadership advancement were means to this end, not the end goal itself. The broader educational goals rather than subject mastery remained the catalyst for learning.

However, rather than view the learning- leadership process as solitary endeavor, the women valued it as communal project. The women focused on blending together individual experiences, spirits, and knowledge within a communal environment to achieve a collective

wisdom for the community. For them, groups of learners and leaders rather than individuals provided the beacons for envisioning the future and enacting change.

The stories of the women provide five core recommendations to adult educators. First, the stories challenge adult educators to incorporate and build upon those support systems African American women bring to the learning environment rather than perceive them as superfluous to the mainstream learning community. Second, the stories press adult educators to critically examine and systematically eliminate the exclusionary nature of their language and practices. Third, the stories advise adult educators to facilitate the formation of networks that connect students of color to leaders of color and allow for role modeling, spiritual respite, personal and professional empowerment, and dream validation. Fourth, the stories urge educators to shift their main emphasis on education away from content mastery and personal advancement to also acknowledge the central location of communal obligations within the learning process. Finally, the stories coax adult educators to revisit their fundamental assumptions about the individual impetus for learning and leadership and to recognize their essential communal components.

Summary

In contrast to those studies which focus on African American women who live either at the extremes of poverty or wealth, and who either are blamed for societal ills or postured as exceptions to the rule, this study situated its exploration on the lives of

professional African American women living within middle class society. It acknowledged their role as leaders within the community and agents of their own lives, rather than as objects to be criticized. Unlike other studies which examined leadership within the context of male-dominated professions, higher education, and community agencies, this study examined the theme within the context of a Caucasian female dominated, health care profession. Unlike other studies about African American women that addressed learning and leadership as separate entities, or within a constricted time span, this study connected learning and leadership as they emerged throughout the life span of the women. It included women from several age groups and across multiple geographic locales within the United States. As a result, this study contributes to the existing, though small, published knowledge base about African American women who hold positions of prominence.

It is important to note that through the use of the oral history methodology, the women shared that they came to understand the interface between their learning paths and their positions of prominence. They expressed that if they had been asked to describe their learning paths to positions of prominence, they may have provided a chronological summary of the degrees they earned and the positions they held. The oral history methodology allowed the women to bring forward to consciousness, an analysis of that which lay buried within the memories of their lived experiences. It allowed the women to see connections between seemingly disparate events, to find answers to the questions in the study, and to construct a deeper understanding of whom they had become.

It is understood that this study examined the lives of only a select group of African American women within a specific occupation. Therefore, its results can not be generalized to other groups. It is also acknowledged that the familiarity of the researcher with the practices of the occupational therapy profession, while allowing an heightened understanding of the stories of the women, may have prevented more probing into underlying messages. The racial difference between the participants and the researcher may have limited the disclosure of certain details, as well as a fuller appreciation of the stories that were shared.

It is recognized that similar studies need to be conducted within other predominantly, female, Caucasian professions to generate a more comprehensive appreciation of the contributions of African American women and to ascertain whether their learning paths, as suggested in this study, reflect those of African American women in other professions. It is realized that studies need to be conducted about other women of color to more fully understand the learning paths of these women and the methods by which they were able to negotiate through the biases of the dominant culture to achieve leadership positions.

Appendix A
Human Subject Consent Form

THE PENNSYLVANIA STATE UNIVERSITY

I, _____, hereby give permission for Janet DeLany to use this taped interview of my life history as part of the course material for her the doctoral program in Adult Education at the Pennsylvania State University in which she is enrolled. She also may use the interview for part of the dissertation research when she reaches that stage of the program. As part of these assignments, I understand that the faculty associated with the program may also review the tapes. At the conclusion of the project, I give permission for Janet DeLany to make the tapes available to AOTA for potential use as part of its archival collection.

I understand that Janet DeLany will use an oral history approach to gather a perspective of history of the American Occupational Therapy Associations as lived by me both personally and professionally. I understand that she is conducting this research because there is little written reference and no formal oral history project about the contributions of African American females to the history of the profession.

I understand that I will be requested to participate in a preliminary phone interview which will take about 30-45 minutes to share biographical data prior to the taped interview. The taped interview will take approximately 2 -3 hours. I understand that I have the right to refuse participation in the project or withdraw from the project, once initiated. I have the right to place restrictions on the use of the transcripts and the tapes, including sealing of information for a designated period of time. I have the right to not answer any question I choose not to answer. If I begin to share information about another individual that is potentially inflammatory, I have the right to request that the interviewer stop the recording and to erase that information in question.

I understand that I will receive a copy of the tapes and a draft of the transcript to review and to correct for transcription errors. I understand that I then will receive a copy of the final transcript. I understand that copies of the tapes and transcripts will not be made available to anyone for purposes not stated in the informed consent form without my written approval.

Number of tapes_____ Date of tapes_____

Interviewee: Name (print)_____
Address :_____
Signature:_____ Date:_____

Interviewer: Name (print)_____
Address:_____
Signature_____Date:_____

Restrictions: _____
_____

Appendix B

INTERVIEW TOPICS

Central Theme: The contributions of African American women to the history of the occupational therapy profession

A. Background

1. Early Life
   a. Family life style and expectations
   c. Family work roles and expectations
   b. Society's expectation regarding the work of African American women

2. Education
   a. The learning environment and support systems within formal education
      1. Elementary
      2. High school
      3. Higher education
      4. Continuing professional education
   b. The learning environment and support systems within informal education

3. Dreams and expectations while growing up about future work possibilities
   a. Your dreams/expectations
   b. family's dreams/expectations of you
   c. Society's expectations of you

B. Work History

1. Description of key work experiences

2. Factors influencing your decision and ability to do/not do the work
   a. Personal
   b. Work context
   c. Professional
   d. Societal

3. Mentoring relationships and network systems associated with work
   a. Description
      1) Formal
      2) Informal
   b. Influencing factors such as age, gender, race, ethnicity, area of interest, political context
   c. Limits of the mentoring and network systems

4. Those aspects of work that were personally and professionally validating
   a. Your perceptions

b. Feedback from others

5. Those aspects of work that were not personally and professionally validating
   a. Your perceptions
   b. Feedback from others

6. Impact of your work on your family
   a. Family roles
   c. Family workload
   d. Lifestyle

C. Towards a more inclusionary history of occupational therapy

1. Your remembrance of how African Americans first entered the OT profession
   a. Political context
   b. Support systems

2. Contributions of Africans Americans to the occupational therapy profession

3. Formation of and contributions of the Black Occupational Therapy Caucus

4. How this history has affected the entrance of African Americans to the profession

5. Internal and external issues for individuals who are African Americans working in a profession that is predominately Caucasian and female

6. Issues the profession must confront regarding inclusivity and exclusivity

D. Summary Reflections

1. Correlation of your work history with your original work dreams
2. Definition of your personal self through your work roles
3. Your view of yourself as a leader and a mentor in the occupational therapy profession
   a. Profession as a whole
   b. For women who are African American

Appendix C

Personal Demographics

Participant	Year of Birth	State of Birth	Current State Resident	Occupational Therapy Education Highest Level of Education
RB	1916	NJ	VA	BS in Music- 1939, Certificate in OT-1950
JB	1950	AL	FL	MS in OT- 1975, Ph.D in Sociology- 1993
KB	1941	MI	MI	BS in OT-1964, MS in Medical Administration-1974
CC	1961	IL	MN	BS in OT-1984, PhD in Neurology/ Kinesiology-1995
WE	1933	NY	NY	BS in OT - 1956, MS in OT- 1973
CH	1947	IL	NY	BS in OT- 1969, PhD in Higher Education-1993
SI	1936	MO	GA	BS in OT - 1959, MS in OT-1977
SJ	1947	TX	MD	BS in OT- 1970, Doctoral Candidate in Psychology
PK	1949	MD	MD	BS in OT- 1972, MS in Health Science & Ethics-1984
JL	1946	IL	IL	BS in OT- 1969, Doctoral Candidate Health & Social Welfare Policy
LL	1933	LA	CA	BS in OT- 1953, PhD in Education/Occupational Therapy-1976-one of first two African American female occupational therapists to earn a doctorate
ML	1935	MO	AL	Certificate in OT-1958, MS in Rehab Counseling-1971
MM	1931	MI	CA	Certificate in OT- 1956, PhD in Rehabilitation Psychology 1976 -one of first two African American female occupational therapists to earn a doctorate
SM	1931	MI	MI	BA in OT-1954, MS in Therapeutic Recreation-1962
MR	1928	AR	AR	MA in Home Economics-1951, Certificate in OT-1957
MS	1941	IN	NY	BS in OT- 1964, MS in ED-1982
WS	1934	IL	IL	BS in OT- 1957, PhD in Education - 1981
BS	1938	AR	FL	BS in OT- 1962, MS in OT/Gerontology -1974
ES	1929	CT	MD	Certificate in OT -1956, MHA in Health Care 1974
BT	1945	IL	IL	BA in OT, MPH in Public Health
SW	1952	TX	MD	BS in OT -1979, MPH in Maternal & Child Health - 1984
NW	1919	VA	MD	Certificate in OT - 1946, MA-1964

Appendix D

Examples of Positions of Prominence

Participant	Positions of Prominence
RB	Coordinator- Tuskegee Institute Rehabilitation Center, Chief of Train Family Assistance Program, Deputy Director-Office of Civil Rights
JB	Associate Professor, Community Activist, AOTA Task Forces
KB	Chair-Occupational Therapy State Association, Fellow Michigan OT Association
CC	Associate Dean, First African American OT/PT with doctorate, Community Activist
WE	OT Program &Allied Health Department Chair, Roster of Fellows, Founding member of Black Occupational Therapy Caucus
CH	OT Program Chair, Roster of Fellows, Chair- AOTA Commission on Education
SI	Chair- Black Occupational Therapy Caucus, Director OT Clinical Services, Community Activist
SJ	OT Program Chair, Roster of Fellows, Chair- Multicultural Task Force
PK	AOTA Ethics Program Manager, Roster of Fellows, Director of State Rehab Services
JL	Kellogg Foundation National Fellow, Roster of Fellows, Progam Chair, Co-founder Black Occupational Therapy Caucus, Community Activist
LL	Assoc VP for Academic Affairs, Slagle Lecturer, AOTA & AOTF President's Commendation, Chair- AOTF Research Advisory Committee, Roster of Fellows
ML	OT Program Chair, Roster of Fellows, National Advocacy Coordinator- United Cerebral Palsy, Civil Justice Reform Act Advisory Committee
MM	Owner- Geriatric Education and Consultant Services, Roster of Fellows, Associate Dean, OT Program Chair, WFOT Roster of Expert Advisors, State director of activities training
SM	OT Program Chair, Consultant- US Dept of Education, Consultant State Voc Rehab
MR	OT Program Chair, first African American Chair of AOTA Commission on Education, Governor's Appointee to Committee on Health Care Reform, Roster of Fellows
MS	OTA Program Chair, second African American Chair of AOTA Commission on Education, Representative to AOTA Representative Assembly, Chair- NY State Board of OT
WS	Owner-organization development consultant firm, Chair- OT program, Director- rehab services
BS	OT Program Chair, Consultant-Geriatric Rehab, AOTA Executive Board, Roster of Fellows, Chair- Geriatric and Education Special Interest Section
ES	AOTA International Program Manager, Roster of Fellows, Colonel and Chief of Army Medical Specialist Corp- first African American and first female to hold position
BT	AOTA Delegate- World Federation of Occupational Therapy, Vice President- AOTA
SW	AOTA Program Manager of Multicultural Affairs, Director clinical rehab services, National Consultant on Diversity and Inclusion, Author
NW	OT Program Chair of first OT program in an historically black university, AOTF Board of

	Directors, One of first two African American occupational therapists

Appendix E

Education and/or Work of Family Members

Participant	Parents/Caregivers	Current Spouse/Partner	Children
RB	M-elementary, homemaker F-elementary, maitre de	post baccalaureate, physical therapist	BA- social work
JB	M-high school, LPN; F- high school- small business owner		d-college- in progress s-junior high - in progress
KB	M - 2 yrs college, retail; F-2 yrs college, recreation director		
CC	M-college*, social work	MS, community ministry	
WE	M-high school, social service		
CH	M-2 yrs college*, teaching assist F- elementary- airport service work	Doctorate-higher education equity issues	d- masters, TV communications
SI	M-high school, factory worker F-high school, factory worker	Doctorate- Episcopal Priest	d- BA in Ed, d- MSW , d- MPH public health
SJ	M-11th grade, domestic worker F- elementary, truck driver	MS- CEO business marketing	s-law school - in progress d- high school -in progress
PK	M-Masters*, reading specialist F-2 yrs college, postal worker		
JL	M-1st grade, factory worker F- high school, postal worker		
LL	M-college, small business owner; Step M- homemaker; F-college, postal worker	Ph.D- artist, higher education	d- BA in psychology/sociology Minor: Black Studies
ML	M-college, social work; F-physician	Veterinarian	
MM	M-2 yrs college, bookkeeper F- 1 yr college, postal worker		
SM	M-some college, homemaker; F- college, registrar, postal worker	bachelors-jury manager	s- attorney
MR	M-college, teacher, bookkeeper F-college, entrepreneur- printer	2 yrs college, postal worker	d-college, business communications
MS	Step M-some high school, food service; F-Ph.D*, counselor, social agency consultant	MS- professor, management consultant	s-attorney, s-physician,
WS	M-college, domestic worker F- high school, Pullman porter		d-MS in library science, in progress; d-MBA financial consultant
BS	M-8th grade, farmer; F-college,		d-college

	farmer, minister, shoemaker		
ES	M-some college*, domestic worker, LPN; Grand F- elementary, farmer; Grand M-elementary, farmer	college	
BT	M-2 yrs college*, occupational therapy assistant; F-high school, radio disc jockey	2 yrs college, business owner	s- high school teacher; d-physician; s-engineer; s-English teacher
SW	M-2 yrs college, domestic work F-high school, small business owner		
NW	M-normal school, domestic work F- no formal education; service work, chauffeur		d-masters, social worker; d- 2 yrs college, visual arts

* Obtained degree either during or after participant earned college degree

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She has practiced as an occupational therapist for over twenty four years, with particular concentration in the areas of behavioral health, child and adolescent development, deaf education, and occupational therapy education. Currently, she is the director of the occupational therapy and the occupational therapy assistant programs at the Pennsylvania State University. In this role, she served on the Strategic Planning Committee for the founding of the Commonwealth College within Penn State. In addition, she serves on state and national committees to address educational issues within the field of occupational therapy.

She has earned numerous grants to provide art experiences to children with special needs, and offer college exploratory options for adolescents who are deaf. In collaboration with another agency, she is investigating the strength and gaps in services for teen parents in rural south central Pennsylvania.