

Go Big on Your Way Home!



Alyson Stover

We are entering an environment in which health care and public health are integrating more than ever, and discipline-specific lines are transforming into large encroaching waves of gray. We must take charge of our own story so that we do not become obsolete, so that our distinct value remains the distinct value of occupational therapy. Occupational therapy is narrative. Our own narrative grows as we experience others' narratives. To future-proof occupational therapy and continue our momentum forward, we must be intentional about intraprofessional collaboration. The American Occupational Therapy Association (AOTA) has also committed not only to discussing JEDI (justice, equity, diversity, inclusion) in principle, but to taking actions to realize it, placing the Allied Health Workforce Diversity Act as a high priority and advocating for its passage with Congress. From guiding academic programs toward more diverse and inclusive missions, to addressing the burnout and current mass exodus of occupational therapy practitioners, to engaging more with both AOTA members and nonmembers in open conversation within their practice settings, this Inaugural Presidential Address offers a message of the need to honor our past so that we can embrace our present to empower our future.

Hello! I am so excited to be here. As I reflected on President Wendy Hildenbrand's Presidential Address yesterday, a story came to my mind. When I was working in a children's hospital, I had the great privilege of working with an adolescent who had been shot more than 10 times. As we were working on putting his socks on—and it had been a pretty long number of weeks that we really hadn't had much conversation—he looked

up at me and said, "You know what, Miss Alyson? Getting shot ain't no joke." And I was like, "You are right. Getting shot ain't no joke." So I thought about these past few years, and I thought about President Hildenbrand, and what came to mind was that your commitment has been unending. President Hildenbrand, your dedication is unmatched, your leadership invaluable, your resilience and your grit inspiring. President Hildenbrand, your presidency ain't no joke. You are leaving me some big shoes to fill. But they're beautiful, and I love beautiful shoes.

I thought today we'd be a little bit different, a little fun, a little bit new in how we do these inaugural addresses. I want to ask Sarah [Sarah Michel, AOTA INSPIRE Content Weaver] to come back out and lead a conversation so you can learn more about me and my vision for AOTA. You can learn more about my narrative, because occupational therapy is narrative. I want to invite you to ask me questions by going to the website on the screen. Please submit your questions! If you want to hear about my vision for AOTA, I need to hear questions from you.

Sarah

Alyson, you obviously want people to leave here today with a call for action. Why is that important, and what do you hope happens as a result?

Alyson

Great question. Awkwafina once said, "When we are in charge of our own stories, amazing things happen."

For more than 100 hundred years, occupational therapy has had many voices defining who we are. Occupational therapy has been defined by how it is different from physical therapy; it's been defined through reimbursement sources like CMS [Centers for Medicare & Medicaid Services] telling us what we can and cannot do, and who can and cannot do it; and it's been defined by administrative teams that limit us to cone stacking and hand exercises.

We are entering an environment in which health care and public health are integrating more than ever, and discipline-specific lines are transforming into large encroaching waves of gray. As President Wendy Hildenbrand said, this requires that we act with urgency. We must take charge of our own story so that we do not become obsolete, so that our distinct value remains the distinct value of *occupational therapy*. And as a result? I'm sure, I'm certain, amazing things *will* happen.

Sarah

You have quite the résumé. You're an associate professor in the OT program at the University of Pittsburgh [Pitt]; you have a law degree with a postgraduate certificate in health law; and you own a private outpatient pediatric practice and cofounded a nonprofit organization that uses occupation to address community, societal, and population needs. I'm exhausted just saying that list! How do you think your diverse experiences will enhance your leadership for AOTA?

Alyson

Wow—we're starting with a tough one! I will reiterate: Occupational therapy is narrative. Our own narrative grows as we have experiences interacting with others' narratives. Through my roles I've had the opportunity to interact with and to hear multiple stakeholder groups. And through that, I've been able to validate various positions and perspectives. Working within various clinical settings, I've encountered barriers across all levels of occupational therapy implementation. Have you experienced it? So have I! Has it been troublesome for you, difficult for you? I may have been there, too. I've used best practice research, focus group exploration, and feasibility and acceptability studies, and I'm honored and eager to bring these collaboration skills to serve the occupational therapy profession at a national level.

Sarah

As the incoming leader for AOTA, what are the three biggest priorities you want the board and leadership to focus on?

Alyson

This is a great question.

First, I want to talk about *INTR*Aprofessional collaboration. I know I've heard it a few times in some of these sessions. The conversation surrounding *inter*professional collaboration is one that many, if not all, of us are familiar with. However, I believe that to future-proof occupational therapy and continue our momentum forward, we must be intentional about intraprofessional collaboration.

The occupational therapy scientist and scholar determine the significance of our work and bring excellence to our practice. The occupational therapy educator transfers this knowledge and creates competency to practice for our entire profession. The occupational therapy clinician, both the occupational therapy assistant and the occupational therapist, implement this evidence in a meaningful way that changes lives and produces valued outcomes.

The occupational therapy student encourages us to challenge monotony and bridges the streams that can isolate each member of this team. As a profession, we must be intentional about building collaborations that represent the vast experiences that exist within this profession. We must recognize that occupational therapy only happens when all

the members of our community—the scientist, the scholar, the educator, the clinician, and the student—are present. We've heard through many military leaders that the best way to defeat a formidable foe is to create division within that formidable foe. Friends, we are viewed as a formidable foe. Do not allow them to create division among us.

Second, I would point to *diversity, equity, inclusion, and justice*—sometimes referred to as *JEDI*.

AOTA has committed not just to discussing JEDI in principle, but to taking actions to realize it. AOTA has placed the Allied Health Workforce Diversity Act as a high priority and has been exceptionally effective at advocating for it with Congress.

We have a DEI strategic plan, and a proposal for the first-ever standing DEI [Diversity, Equity, and Inclusion] committee with representation—voice and vote—on the Board of Directors.

We have presentations at this conference coming from this very recently formed AOTA DEI Committee.

We have our first ever hybrid annual conference, allowing participation through various platforms. We have proposed bylaws that create opportunities for micro-volunteering while paving the way to eliminate leadership criteria that was rooted in privilege.

We must celebrate these experiences while we continue to pursue the path to inclusion, equity, and justice in a way that meaningfully supports diversity in our profession. However, we cannot focus merely on internal initiatives; we must participate in larger, external work to end exclusion, injustice, and inequity.

We must role-model occupational therapy as *the* solution for systemic change. We must not prioritize “getting it exactly right” over action, and we must be willing to do the hard work of continuous assessment and improvement. A young entrepreneur once said, “If you're not making mistakes, you're not making decisions.” We must acknowledge the personal investment in this work and the emotion that cannot be dissected from our engagement in JEDI initiatives. However, we must also always remember, as Indira Gandhi said, “We cannot shake hands with clenched fists.”

And third, finally, *reinvention*. I once heard someone say we must honor our past so that we can embrace our present to empower our future. I believe this describes reinvention and what we must commit to pursuing within occupational therapy. Reinvention requires us to identify the powerful and effective elements of our history and unite these with the context of our profession in the present while we seek ways to incorporate innovation that will empower the future.

What does this look like to me? This looks like committing time and resources to ensuring that CMS values occupational therapy and all of its practitioners and reimburses for our services while creating and establishing opportunities for new revenue streams. It means not having to explain what occupational therapy is to anyone who is not in the occupational therapy community. It means identifying an occupational therapy practitioner as an occupational therapy assistant in a skilled nursing facility or school, as an occupational therapist in a hospital or community-based setting, as well as an implementation manager, an entrepreneur, a vice president of quality, an Indiana State Representative (Dr. Victoria Garcia Wilburn), and more.

This looks like embracing the lessons we've learned and the knowledge we've gained during emergency application of telehealth access and thrusting ourselves into a more expansive, intentional, and proactive presence in the fields of technology. This looks like honoring our past so we can embrace our present to empower our future.

Sarah

What will it take to get us there?

Alyson

I do believe that we must be humble enough to expect that this process is going to include a lot of mistakes, and we must be open and transparent about the mistakes as well as the successes. To me, openness is about welcoming others into your space and making them feel accepted, even as we're making those mistakes.

We must do more than speak about trust, or lack of it. We must instead, as problem-solvers, identify how we can build confidence in relationships—internal relationships, external relationships, and even relationships within our own selves. *Trust* has become a term that demands perfection; building confidence in relationships allows for transparent communication and acceptance along a fallible path.

Francesca Batacelli once sang a song in which she said, “I got a couple dents in my fender”—any of you who’ve driven with me know that’s true for me—“I got a couple rips in my jeans, trying to put the pieces together, but perfection is my enemy. On my own I’m so clumsy, but on your shoulders I can see.” This is where we must build those relationships with confidence.

We must seek information that changes us. Elisabeth Elliot once described the experience of a missionary friend. This missionary said, “Things were simple before I went to Africa. I knew what the Africans’ problem was, and I knew the answer. When I got there and began to know him as a person, things were no longer simple.” We must have the confidence to challenge the information that we “know” the answers to, and the courage to reach out and get to know *all* of the information that exists. We must get to know *all* of the members of our occupational therapy community, *all* of AOTA, *all* of our consumers, *all* of our society. Our learning must never stop.

We must eagerly engage in crucial conversations. We must ask more “what” questions and refrain from rhetorical questions. We must do this with urgency. We must do this as a community, and we must do this as members of AOTA and members of our state associations, collaboratively.

Sarah

I’m dying to know what your superpower is for how you do this work–life balance.

Alyson

There was a meme once that said, “I birthed my own personal bully.” My superpower is my children. They’re the ones who say, “Mom, nobody cares, stop talking about this.” “Mom, we want to go out.” “Mom, we want to go on a vacation that doesn’t have an Expo.” And I have a husband who always walks behind me, and as I say “Yes,” he says, “But not right now.” And I have a family that is so extensive—16 are here today—who say, “No matter where you are, or what you’re doing, family comes first. And have you called your mother yet today?”

Sarah

You shared with me that you have a lot of leaders who you really admire. Can you give us a few who will really shape your leadership role here?

Alyson

Absolutely. I could have conversations about influential leaders for hours, but I’ll stick with the three who are most influential to me right now. First, Ruth Bader Ginsburg. She was fiercely committed, brilliantly articulate, and authentically receptive. However, she often acknowledged that there can be, and will be, fear in the work, but we must still *do* the work. She embodies to me a reading from the Bible that both encourages me and challenges me—that is that we must always “seek justice, love mercy, and walk humbly.” I am also fairly certain we’re about the same height.

Second on this list is Wangari Maathai. My daughter introduced me to this outstanding Kenyan woman leader when Avary was just 9 years old. Dr. Maathai founded the Green Belt Movement. This movement has planted more than 51 million trees in Kenya. However, this movement has also provided opportunities for African women in both work and education.

One of her most inspiring quotes for me is when she said, “You cannot protect the environment unless you empower the people, inform them, and help them to understand that these resources are their own.”

Dr. Maathai observed and experienced a community need, and she transformed a solution into a global initiative. I see occupational therapy as the solution, and I am eager to watch as we catapult this profession forward to be the global initiative that is desperately needed.

Additionally, I consider occupational therapy, and AOTA and our state associations, as “our environment”—we cannot protect our profession and associations without empowering the members of this great profession, informing them, and helping them to understand that these resources—AOTA, state associations—these resources are your own.

Finally, the elephant. I have long loved this magnificent species. They are so large, yet so gentle. This incredible animal has taught me that the key to leadership is to be like an elephant’s trunk: strong yet flexible, versatile yet delicate.

Sarah

Who has been an important mentor to you, and how did they impact your success?

Alyson

This is another question where I could go on and on! I will try to keep this brief by walking us through some of the highlights of my chronological mentor journey.

I have the great honor and privilege to come from a strong matriarchal family. I have watched women overcome incredible obstacles, achieve extraordinary feats, and live day to day with purpose. Some of these women are here with me today—both physically: my mother, Aunt Robbie, Aunt Karen, Elisa, and Thea—as well as spiritually: my grandmothers, Aunt Lynn, and my mother-in-law Barb.

My family also includes some confident and supportive men, who taught me that I should embrace all that I am and all that I have to say. Some of these men are also here today: my father, Uncle Cliff, Steve, Christian, and Liam; as well as my brother at home and my father-in-law Charles, in spirit. My mother has role-modeled what it looks like to love intentionally and never give up. This has formed the foundation of my practice as an occupational therapist and as a human.

My father provides me with random wisdom. I will share one of my favorites. My father is a Vietnam veteran. During one of my most difficult trials of my life, he told me this:

Trials are much like your own personal battles. And I have been to war. When the helicopter first dropped me off in Vietnam, it felt like I would never get through and get out. And then, 14 months later, when I got on the helicopter to leave, it felt like I was there for a blink of an eye. The trial only seems large as you enter. If you remember that, you can push through with motivation and endurance.

This family, these individuals, they are my first and my most powerful mentors and influences.

My next mentor emerged when I was only 10 years old: my cousin Robyn. Robyn was my first, my longest, and my most patient consumer of occupational therapy. She was my introduction to the profession through her own experience with a childhood traumatic brain injury, and she taught me how to understand occupations, client factors, and performance skills in every context, even when we were visiting Africa together. You see, Robyn is *exceptional* at finding Waldo in any Where’s Waldo challenge. I am terrified of bugs. Before bed each night, I would tell Robyn there was a bug much like Waldo to find in our bed. Each night she would search the bed, and say, “Alyson, I can’t find that bug anywhere.” With that confidence I could turn off the light and we could both get a good night’s sleep!

As I began to venture into career exploration and development, I had the great honor of taking a step aerobics class from Pam Toto. Pam taught me how to *love* occupational therapy, not just work as an occupational therapist. She challenged me to go beyond my goals and aspire, and she taught me to never be embarrassed by my passion. She also

challenged me through helicopter step aerobics moves. Pam then introduced me to another mentor, Amy Lamb. Amy taught me how to channel that passion, and find the message in not only what is being said, but in what is not being said. She taught me the value and power of advocacy and authenticity.

Which leads me to a large mentor family—Pitt OT. I grew up in Pitt OT. Having the privilege to learn from Denise Chisholm, Beth Skidmore, Ketki Raina, Joan Rogers, and Margo Holm was never something I took for granted. Intra-professional collaboration was not only celebrated, but it was mandated.

Here, I learned not only how to be an exceptional occupational therapist, but also to rely on the collaborations of the occupational therapy scientists, scholars, practitioners, educators, and students to define our profession and create the avenues of professional excellence.

When I first joined Pitt OT as faculty, I remember feeling as though I was finally moving from the kids' table to the adults' table at Thanksgiving dinner. However, Dr. Rogers and Dr. Holm—on your visits back, I still don't feel quite ready for that seat!

I would be remiss if I did not mention the mentorship that has emerged from relationships with my husband and children. Craig has taught me how to do things with meaning and purpose to elicit real change. He reminds me that occupational balance is for *everyone*, even the occupational therapy practitioner—even me. He has also taught me that everyone, even the most resilient and sometimes obstinate, needs a rock, an unmoving foundation they can count on, and he is my rock. My son Connor keeps me honest. He has always been sincere and has shown me that authenticity may not always look perfect, but it is perfectly what each person needs from me. And my daughter Avary reminds me that passion should be celebrated, and she often restores mine when I feel it fading.

Finally, through Alyssa Pomerico Francis, one of the therapists in my own clinic, I have experienced that I learn even more from those who consider me their mentor. Alyssa has taught me how to empower and encourage others while remaining a lifelong student. And so my mentorship journey is not even halfway done yet.

Sarah

We have some great questions that came in, from the virtual and in-person audience. I'm going to start with the first question, from Josh. His question is: What is your plan for guiding academic programs toward more diverse and inclusive missions to better reflect national demographics?

Alyson

We have some programs that have started initiatives that have been really successful in this area. I had the great privilege of speaking with two students at the BU reception who were actually USC students. They had recognized that one of the things that was really valuable to them was seeing some of their own diversity reflected in their classmates and their peers. We know that there are programs and initiatives that have been started, but we've got to build opportunities to share these strategies and scale them to meet the needs of many programs. My hope is to be able to provide this knowledge and information with a space for larger discussion and collaboration, at both national and global levels. What are some real outcomes that will actually give us data that tells us honest answers about the effectiveness of these strategies? And then how do we change, mold, and modify those so that each and every program that exists within occupational therapy has access to them and can continue to build upon them?

Sarah

How do you plan to support the untraditional OT areas such as homelessness, incarceration, refugees, and areas that OTs need to be accepted in more?

Alyson

There was an incredible panel here earlier this week; there's a great podcast, "Uncommon OT," and so I think one of the ways we need to support these emerging areas is to identify individuals who are doing it well, and bring them to micro-volunteering opportunities, to programs, to areas and avenues of knowledge translation, to get the information out there. I think we are doing this work, and doing it really well. I hate to call it untraditional. We're doing what we know how to do in a way that is meaningful, and we are not discriminating based on access. We just need to find the pathways so more people can hear about what we're doing and how we're doing it. I'm willing to champion it, but I need those experts beside me to share and give the data, the evidence, and the narrative of what it looks like day to day.

Sarah

As president, how do you plan to address the burnout and current mass exodus of OTPs? How will you support us?

Alyson

I said earlier that I myself experience burnout. We are the experts in occupational balance for every single person but ourselves. And so my hope and my mission are to really start to identify the occupational therapy practitioner with titles other than "occupational therapy assistant" or "occupational therapist." We have a beautiful, incredible, and brilliant lens that nobody else brings to the table. Nobody else has our training. We heard Dr. Berry talk about that. There are things that we say in our first interaction with a client, with a population, with the community, that bring healing from the first moment they meet us. This is not just common sense. This is the distinct value of occupational therapy. And so, to prevent burnout, we must find ways in which we are only working one job. Too often, we are taking on the role of occupational therapy practitioner while then volunteering our skills in areas of implementation manager, or resource identifier, or advocate. How do we elevate the status and recognition of our professional brilliance so that we can bring it to a table and not have to work four jobs just to speak it?

Sarah

How will your vision reach nonmembers?

Alyson

One of the things we have in place right now is a program called Board to Classroom. Board to Classroom is not used to the full capacity that I believe it could be, and it brings a lot of information about the association as a resource to our students. I'd like to find ways that we can elevate how often these programs happen, so that these conversations occur more than once a year in a leadership course in a handful of programs, and instead happen regularly as a conversation with any student who wants to participate. Beyond that, I'd like to expand this program, building off of an idea that our past Vice President Deborah Young brought to the table, and implement Board to Clinic, or Board to Practice, areas. In this program I don't want to just tell you about the work of the association. I want it to be an ongoing, open conversation with members and nonmembers in their practice settings, in the moment, who get to say, "I need you to listen, and I need you to listen right now, while I'm living it." My vision is that Board to Clinic will be that avenue to open the door to nonmembers as well as members while finding ways to continually improve the work and resources that are provided to you by your national association. I also get excited about opportunities presented for new collaborations with our state associations, so that in this work, and in these data that we are collecting, we can further communicate with the state associations and say, "How does AOTA and the state association work together for Alyssa Pomerico Francis in the middle of Nowhere, Pennsylvania?" I want to move to a place where the conversation

is always happening, and the collaboration doesn't stop with that one board member but goes all the way through to all association levels.

Sarah

Rather than praising clinicians for their resiliency, how do you plan to make changes so that resiliency isn't needed?

Alyson

We're all going to start True Crime podcasts! Because I feel like you make a lot of money, but you don't have to work but like an hour a week! How we build resiliency is by changing expectations. For a long time we kept striving and striving toward something to me that looks like it can only be defined as perfection. And what the pandemic taught us is that, you know what? Telehealth intervention might not look exactly the same as the last time you set foot in a clinic, but it still worked. Putting our efforts forward as a collective, a collaborative group means that we are not consistently on our own reinventing the wheel, but we are building upon a shared brilliance and experience. It's about creating a narrative that represents each one of you and what you are doing and ensuring that when that narrative talks about the value of occupational balance, it is not talking about it just for clients, communities, and consumers, but it is actually talking about it in the context of us as members of the occupational therapy community. And so my goal is to really think about how can we move to a place of changing and shifting the expectations, building off of what we learned during the pandemic.

Sarah

One of my favorite shows is *Inside the Actors Studio*, where the interviewer, James Lipton, always closes his celebrity interviews with 10 rapid questions in a row. So we're going to go Inside the AOTA Studio right now.

- What is your favorite word? *Amen*
- What is your favorite thing to do after work? *Run or eat, which is weird, but both.*
- What motivates you? *My family, people.*
- What dampens your spirit? *Remaining stagnant, and complacency.*
- What sound or noise do you love? *'90s pop music that reminds me of my aerobics helicopter!*
- What sound or noise do you hate? *The alarm clock.*
- What is your favorite snack? *Unhealthy? Sour straws. Healthy? Greek yogurt.*
- Now, the last question I have is, what is your *why*? *My why is the 16 people who are here today with me, my family, as well as my family who are at home, and with me spiritually. My why is Pitt OT. My why is this profession. I love this profession and all that it can bring to the world.*

Thank you so much for allowing me the privilege of sharing my narrative, the honor of representing this incredible profession and each one of you. We are OT. We are AOTA. 🍌