Beliefs about knowledge and knowing, also called epistemic and ontological cognition (EOC), are associated with many aspects of learning and achievement. Despite the importance of EOC, little research has been done to examine the EOC of occupational therapy students. Educational psychologists have proposed various theories related to beliefs about knowledge and knowing; many of these and their application to occupational therapy education and practice have been described elsewhere (Mitchell, 2013). The current study, which sought to describe similarities and differences between entering and postdidactic students’ EOC, was based on Greene, Azevedo, and Torney-Purta’s (2008) Model of Epistemic and Ontological Cognitive Development (EOCD). In their model, Greene et al. referred to the nature of knowledge as ontological cognition. Naive ontological cognition includes beliefs that knowledge consists of simple, discrete facts and that it is certain and unchanging, whereas the more sophisticated view is that knowledge is integrated and tentative. The term epistemic cognition refers to beliefs about how knowledge claims can be justified, for example, by expert authority figures or personal experience.

On the basis of the pattern of EOC, Greene et al. (2008) proposed four positions: realist, dogmatist, skeptic, and rationalist. The realist holds strong beliefs in simple and certain knowledge and justification of knowledge either through the word of an authority figure or personal experience. Both the dogmatist and the skeptic hold weaker beliefs in simple and certain knowledge than the realist; however, the dogmatist believes in justification by an authority figure, whereas the skeptic holds stronger beliefs in personal justification. The skeptic believes that what counts as knowledge may be specific to the individual, similar to a position other authors have termed multiplist (e.g., Kuhn, Cheney, & Weinstock, 2000). The most sophisticated position, rationalist, also involves beliefs in tentative, integrated knowledge; however, the rationalist uses multiple sources.
of evidence to evaluate knowledge claims, considering the context when weighing the evidence. Greene et al. (2008) proposed that people may hold less sophisticated positions in well-structured domains that use structured algorithms for solving problems (e.g., math) than they hold in ill-structured domains in which problems have more than one potential solution (e.g., occupational therapy).

Students’ EOC may present obstacles to successful learning and achievement in an occupational therapy program. Research has shown that students who demonstrate naive ontological cognition may be less persistent in problem solving (Schoenfeld, 1983) and may have difficulty solving ill-structured problems (Schommer, Crouse, & Rhodes, 1992). These students may struggle with the types of learning experiences often used in occupational therapy education, such as in case-based learning. Dutton (2003) found that students with more naive EOC perceived cases as opportunities to learn protocols for rigid application to similar cases in practice rather than viewing them as opportunities to learn the process of problem solving in occupational therapy. Students with naive EOC may also prefer experts as sources of knowledge and may demonstrate negative emotional reactions to approaches that require active information gathering to evaluate the situation and reach logical conclusions based on multiple sources of evidence (Miflin, Campbell, & Price, 1999; Taylor & Burgess, 1995). EOC has been empirically linked to metacognitive skills, learning, and academic performance (e.g., Dutton, 2003; Muis, Bendixen, & Haerle, 2006; Schommer et al., 1992).

Better understanding of occupational therapy students’ EOC could influence occupational therapy education in a variety of ways. Understanding students’ EOC could guide educators in choosing instructional methods, the effectiveness of which may vary on the basis of the sophistication of students’ EOC. Students who enter occupational therapy programs at a more naive EOC level may struggle unless they successfully progress toward the more sophisticated position of rationalist. Naive EOC could be a potential impediment to learning that could be addressed during remediation.

Greene et al. (2008) noted that EOC might vary across academic disciplines, and Hofer (2006b) called for research to examine the EOC characteristic of particular disciplines. Consistent with the rationalist view, occupational therapy practitioners must critically assess knowledge claims on the basis of the context, evidence, authoritative sources, and their own experience to arrive at a reasoned solution to ill-structured problems. If gaps exist between the EOC of entering students and the EOC that supports effective practice, it would behoove educators to work toward bridging those gaps. The Green et al. (2008; Greene, Torney-Purta, & Azevedo, 2010) model proposes that exposure to education facilitates the transition from one position to the next; therefore, participation in an occupational therapy curriculum might be expected to promote the development of more sophisticated EOC.

Currently, no studies have been published describing the EOC of occupational therapy students. The current study compares and contrasts students’ EOC at entry and on completion of didactic coursework. Understanding occupational therapy students’ EOC may shed light on one of the fundamental influences on student learning and inform educators as they endeavor to prepare competent practitioners. Recognition of naive EOC not only may help educators provide more effective instruction and assist struggling students, it may also give rise to learning experiences that facilitate the development of EOC and ultimately lead to the preparation of more effective practitioners. This study addressed the following question: What are the similarities and differences in the EOC of occupational therapy students at the beginning and end of the didactic portion of an entry-level master of occupational therapy (MOT) program?

**Method**

**Research Design**

The study used a mixed-methods cross-sectional design to examine the research question. The study was granted exempt status by the university’s institutional review board.

**Participants and Setting**

Participants were two groups of entry-level MOT students enrolled in a health science center campus in the mid-South region of the United States. All of the 21 students who were in their 1st wk of the program and 33 of the 35 students who had completed the didactic coursework volunteered to participate. All students had completed 90 credit hours of prerequisite coursework; they may or may not have earned a bachelor’s degree. The program consisted of 81 credit hours of basic science and occupational therapy coursework, including three 2-wk Level 1 fieldwork experiences (one during each of the three 6-mo didactic terms) and three 3-mo Level 2 fieldwork experiences (after the 18-mo didactic coursework).

**Instruments and Procedures**

Two quantitative self-report measures were used: the Epistemic Beliefs Inventory (EBI; Schraw, Bendixen, & Dunkle, 2002) and Schraw and Olafson’s (2008) Four-Quadrant
Scale of Ontology and Epistemology (FQS), with instructions adapted for occupational therapy students (mFQS). The EBI consists of 32 items representing Certain Knowledge, Quick Learning, Simple Knowledge, Omniscient Authority, and Fixed Ability factors. Participants rate the strength of their beliefs on a 5-point Likert scale ranging from 1 = strongly disagree to 5 = strongly agree. The Simple Knowledge and Certain Knowledge (SCK) factors were combined and used as dependent variables, along with the Omniscient Authority (OA) factor. EBI internal consistency reliabilities range from .50 to .65. Test–retest reliability ranges from .62 to .81. Studies have shown that the EBI explains around 40% of sample variance. Evidence of construct validity is available for the five factors of the EBI, and the measure has demonstrated modest but significant predictive validity for reading comprehension (Schraw et al., 2002).

On the FQS, respondents rate their beliefs along a continuum from realist to relativist for both epistemology and ontology. The realist end of each continuum represents beliefs in certain ontology or epistemology, and the relativist end represents beliefs in changing, tentative ontology or epistemology. The epistemology continuum is horizontal, intersecting at right angles with the vertical ontology continuum. The result is four quadrants: realist–realist, realist–relativist, relativist–realist, and relativist–relativist. Each axis of the scale measures 150 mm in length, allowing both ratings to be scored on a scale of 1–150 using a ruler (Schraw & Olafson, 2008). The participants provided narrative explanations for their self-ratings.

No published reliability or validity evidence is available for the FQS, but Schraw and Olafson (2008) piloted the FQS with practicing teachers enrolled in graduate programs and found a statistically significant positive relationship between their epistemologies and ontologies. Consistent with the EOCD model, a naive ontological worldview (OW) did not appear to be compatible with a sophisticated epistemic worldview (EW). Greene et al. (2008, 2010) recognized that additional EOC dimensions may exist, and the mFQS allowed participants to describe dimensions other than those specified by the EOCD model. Schraw and Olafson also suggested that using measures of separate EOC such as the EBI simultaneously with more holistic measures such as the FQS may allow for cross-validation of the measures.

The EBI, followed by the mFQS, was administered to students in a classroom setting either during the 1st wk of the occupational therapy program or within 2 wk of the end of the didactic coursework (i.e., after 18 mo in the program, before Level 2 fieldwork). No time limits were used, and students were assured both verbally and in the written instructions that there were no right or wrong answers.

Data Analysis

The data were first checked for accuracy. Internal consistency reliability of the scales, means, standard deviations, and effect sizes were calculated. An iterative process was used to analyze students’ written explanations on the mFQS; responses were read and categorized on the basis of patterns and similarities and then categories were reviewed and revised as necessary. Categories were either based on the EOCD model or emerged from the data.

Means and standard deviations for the EBI SCK and OA factors and the mFQS EW and OW dimensions were used, along with the narrative data from the mFQS, to describe the students’ EOC. A multivariate analysis of variance (MANOVA) was performed to test for differences among the entering and postdidactic students’ SCK, OA, EW, and OW scores.

Results

Of the 21 entering students, 86% were female. The average age was 22.8 yr (range = 20–35). Ninety percent were White, 5% African American, and 5% Asian. Of the 33 postdidactic students, 91% were female. The average age was 24.5 yr (range = 22–38). Eighty-eight percent were White, 9% were African American, and 3% were Asian.

Internal Consistency Reliability of the EBI Factor Scales

Initially, the internal consistency reliabilities of the SCK and OA scales of the EBI were .53 and .55, respectively. Elimination of Items 11, 18, and 22 from the SCK scale yielded a 12-item scale with a Cronbach’s α of .62. Elimination of Item 7 from the OA scale yielded a 4-item scale that also had an internal consistency reliability of .62. These amended scales were used in the subsequent analyses.

Descriptive Data

Dependent t tests revealed that for both groups of students, SCK scores were significantly lower than OA scores: entering students, $t(20) = -7.969, p < .001$; postdidactic students, $t(32) = -7.515, p < .001$. This finding suggests stronger beliefs in justification by authority than in simple and certain knowledge. Dependent t tests revealed no significant differences between EW and
OW mean scores for the entering students, \( t(20) = -1.262, p = .221 \). OW scores were significantly lower than EW scores for the postdidactic students, \( t(32) = 2.211, p = .034 \), suggesting more sophisticated OW than EW (see Table 1).

**Differences Between Entering and Postdidactic Students**

Preliminary analyses of all dependent variables (SCK, OA, OW, and EW) using skewness and kurtosis statistics indicated that none departed significantly from normal distribution curves. One postdidactic participant was an outlier at the multivariate level. Profiling revealed nothing remarkable except that this participant placed himself or herself at the extreme relativist end of the EW scale and at the extreme realist end of the OW scale. Removal of this participant resulted in no substantive effect on the means, standard deviations, or MANOVA results. Therefore, the results for all 54 participants are reported. Both the multivariate test of equality of the variance–covariance matrixes, Box’s \( M = 6.878, F(10, 8462) = 0.626, p = .793 \), and the univariate tests of homogeneity of variance were nonsignificant at \( p < .01 \): SCK, \( F(1, 52) = 0.002, p = .964 \); OA, \( F(1, 52) = 2.315, p = .134 \); EW, \( F(1, 52) = 2.785, p = .101 \); and OW, \( F(1, 52) = 5.864, p = .019 \).

The MANOVA was statistically significant, Wilks’ lambda = 0.698; \( F(4, 49) = 5.303, p = .001, \eta^2_p = .302; D^2 = 1.75 \), indicating group differences in scores on the set of dependent variables. Bonferroni-adjusted \( (\alpha = .0125) \) univariate analyses of variance were used to determine which of the four dependent variables contributed to group differences. As shown in Table 2, the univariate tests indicated that only the OW dimension of the mFQS contributed to the multivariate significance. The postdidactic students’ OW scores were lower than the entering students’ scores, indicating more sophisticated OW; \( \eta^2_p = .250 \).

**Table 2. Results of the Bonferroni-Adjusted Univariate Tests for Students’ Scores on the EBI and mFQS**

<table>
<thead>
<tr>
<th>Measure</th>
<th>( F )</th>
<th>( p )</th>
<th>( \eta^2_p )</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EBI factors</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Simple and Certain Knowledge</td>
<td>1.512</td>
<td>.224</td>
<td>.028</td>
</tr>
<tr>
<td>Omniscient Authority</td>
<td>3.150</td>
<td>.082</td>
<td>.057</td>
</tr>
<tr>
<td><strong>mFQS dimensions</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Epistemic Worldview</td>
<td>2.347</td>
<td>.132</td>
<td>.043</td>
</tr>
<tr>
<td>Ontological Worldview</td>
<td>17.341</td>
<td>&lt;.001</td>
<td>.250</td>
</tr>
</tbody>
</table>

**Note:** EBI = Epistemological Beliefs Inventory; mFQS = modified Four-Quadrant Scale.

Figure 1 presents the percentage of students in each group whose self-ratings placed them in each of the four mFQS quadrants. In each group, 1 student’s ratings were at the intersection of the axes, resulting in no quadrant. Thus, the percentages total less than 100.

Substantial differences existed in the percentages of entering and postdidactic students who made comments related to three themes when explaining their mFQS ratings: client as authority, client–practitioner collaboration, and individual realities. None of the entering students made statements related to the client as the authority in intervention or to individual realities, whereas 48.5% and 66.7% of the postdidactic students, respectively, made such comments. Of the 16 postdidactic students who described the client as the authority in making intervention decisions, 15 were in the relativist–relativist quadrant, and the other was in the realist OW–relativist EW quadrant.

The postdidactic students also described how the client’s individual reality and unique beliefs and values would influence the approach used in treatment. One wrote, “I lean more towards both epistemological and ontological relativism because I believe treatment techniques should be different for every client because they all have different values and beliefs.” Of the 22 postdidactic students who mentioned this theme in their comments, 17 were in the relativist–relativist quadrant, 3 were in the realist OW–relativist EW quadrant, 1 was in the relativist OW–realist EW quadrant, and 1 was in no quadrant.

One theme emerged from the entering students’ explanations but not from the postdidactic students’ explanations: Close to half of the entering students made statements related to client–practitioner collaboration, whereas none of the postdidactic students made these types of comments. Of the 11 students who made comments related to client–practitioner collaboration, 6 were in the relativist–relativist quadrant, 3 were in the realist OW–relativist EW quadrant, and 1 was in no quadrant.
Discussion

Ontological Cognition

According to Greene et al. (2008, 2010), only the realist holds strong views about the simplicity and certainty of knowledge (the term strong views has not been operationally defined). The mean ontological cognition scores of both groups in the current study were lower than the median of 3 on the 5-point EBI scale, and the two groups did not differ significantly on this scale. The scores suggest that both groups had moved beyond the realist position, consistent with Greene et al.’s (2008, 2010) hypothesis that the realist position is characteristic of children ages 4–12 yr. In a study of 740 middle school through graduate school students, Greene et al. (2010) found that those classified as realists had lower educational levels than had been attained by these entry-level MOT students. In this study, the students’ narrative comments suggested movement beyond the realist position; they made statements that suggested a degree of belief in simple and certain knowledge but not an absolute adherence to this point of view. One entering student commented,

My reasoning for this area is in regard to my belief that while some practices, procedures, etc. in the field may be fixed, research is constantly allowing the field and treatment to change and improve. Therefore, one must be flexible to learn and adapt in order to effectively and efficiently treat their patients.

In general, the students’ written responses demonstrated evidence of beliefs in both certain and uncertain knowledge consistent with Baxter Magolda’s (2002) description of transitional knowing, in which knowledge is certain in some areas and uncertain in others, and compatible with Schommer-Aikins’ (2002) view of differing EOC as a matter of frequency. According to Schommer-Aikins, more mature thinkers demonstrate beliefs that are primarily—but not exclusively—flexible and contextually relative, allowing incorporation of new ideas, adaptation of old ones, and preservation of foundational beliefs. Because occupational therapy knowledge incorporates information from both well-structured domains such as anatomy and ill-structured domains such as psychology, it is not surprising that students who had completed prerequisite and occupational therapy coursework described belief in both certain and uncertain knowledge.

Despite the similarity in EBI scores, significant differences were found in the occupational therapy–specific mFQS ontological cognition scores and the narrative comments made by the two groups, with evidence of more sophisticated ontological cognition in the postdidactic students. The postdidactic students appeared to have a growing appreciation of multiple perspectives and recognition that factual information needs to be adapted and applied differently according to the context. They also acknowledged that theory and treatment approaches change over time and that multiple assessments can be necessary to achieve a comprehensive view of the client and make intervention decisions. According to one postdidactic student,

Although two clients may have the same diagnosis, every single client is different and should be approached in a different way. There may be occasions where you can use the same approach with two patients of the same diagnosis; however, each client should be approached in a unique manner. There are no two individuals alike; therefore their treatment and approach should be customized to fit each one. There is no one correct way to assess and treat a client; therefore, two clients with the same diagnosis can have multiple approaches to their care, all of which are beneficial and produce optimal outcomes. As new evidence arises, changes should also be made in the approaches used with patients. Better information and results lead to better outcomes for our patients. . . . There is not a cookie cutter approach to assessment or treatment that should be used for a specific diagnosis.

Hofer (2006a) described the development of expertise in a discipline, stating that a critical step in this development involves integration of the discipline’s epistemic assumptions. These data may indicate that the postdidactic students were beginning to grasp the EOC and assumptions that are characteristic of occupational therapy (American Occupational Therapy Association, 2014) and to more accurately assign characteristics to the
ontological categories of occupational therapy knowledge (Greene et al., 2008, 2010).

**Epistemic Cognition**

Both groups’ mean scores on the OA factor of the EBI were slightly above the median score of 3 on the 5-point scale, with no statistically significant differences between groups on either measure of epistemic cognition. The EBI scores suggest that participants had strong views about justification of knowledge by authority, which could indicate a dogmatist position. However, the EBI does not include a personal justification factor that might allow discrimination among the dogmatist; the skeptic, who has strong beliefs in personal justification; and the rationalist, who considers multiple sources of evidence (including authority and personal experience), the quality of the evidence, and the context (Greene et al., 2008, 2010). Nevertheless, the theme of justification by authority, specifically research and other practitioners, was apparent in the narrative data for both groups of students. The narrative statements related to justification by authority differed by group, however. For the entering students, the theme of collaboration between the client and practitioner during intervention was apparent; however, an extension of the idea of omniscient authority to the client–practitioner relationship also emerged. That is, one-third of the entering students made statements that pointed to the practitioner as the authority for the client. For example, one student remarked,

The therapist should decide what assessments and interventions should be done. . . . The client will have to be willing to participate in the treatment process, but the therapist was educated to treat patients so they should decide what treatment should be done.

Such beliefs conflict with the client-centered approach advocated by the occupational therapy profession (American Occupational Therapy Association, 2014). At entry into the program, these students had not yet been exposed to the philosophy of occupational therapy and the process of building rapport and developing a working alliance with the client.

In contrast, the postdidactic students made statements suggesting consideration of the client as more than a source of knowledge. These students discussed the active role of the client in collaborating with the practitioner and making intervention decisions. In fact, the theme of the client as authority became apparent in the postdidactic students’ comments. For example, one student commented,

Each individual is different, and occupational therapists are known to be client-centered, involving the client in every decision in the process. In order to build rapport with your client, you must be honest and involve them in all decision making. After all, the decisions are about them, not the therapist. The client is the most important member of the team because he or she will determine the plan of treatment with what is most important to him or her. The client is able to best define the disability’s effect on his or her life and can make the best choices in adapting and/or restoring functionality in everyday life.

For the postdidactic students, other prominent themes related to epistemic cognition included the use of multiple sources to justify knowledge, particularly previous experience, client input, and research. The understanding of different client perspectives and their influence on the intervention process was also a prominent theme for the postdidactic students.

Two of the primary sources of knowledge identified by the entering students were personal experiences and logic and reasoning, with emphasis on logic and reasoning. The entering students considered contextual aspects such as client variables; however, the evidence was limited that they weighed multiple sources of evidence and considered the quality of the evidence, as the rationalist does. These patterns are consistent with previous research suggesting that few people reach the rationalist position (Greene et al., 2010), although Greene et al. (2010) hypothesized that by mid- to late college, students could demonstrate a rationalist EOC in an ill-structured domain such as occupational therapy.

Overall, this study found evidence of both dogmatist and skeptic EOC in the entering students’ statements. Some of the ideas that emerged from their narrative responses, such as the view of the practitioner as the authority for the client, the notion of the practitioner “allowing” the client to make intervention decisions, and the use of research as a source of knowledge, provide evidence of dogmatism. Conversely, like the skeptic, all of the entering students made statements related to personal justification, specifically justification through personal logic and reasoning. Although a skeptic stance may have been more prominent, the dogmatist view was also apparent.

The postdidactic students described less dogmatist beliefs, deemphasizing the role of the omniscient authority in the justification of occupational therapy–specific knowledge. However, the prominence of the personal justification theme suggests that many of the postdidactic students continued to hold the skeptic position. In addition, almost half of these students described beliefs in multiple, equally valid approaches to intervention and answers to problems, similar to the multiplist position described by Kuhn et al. (2000). Despite this evidence,
other evidence suggested that the postdidactic students may have moved toward a more rationalist position in terms of occupational therapy–specific knowledge. These students appeared to place less emphasis on the authority of the experienced clinician, looking instead to the client as the authority for making intervention decisions. In fact, only one postdidactic student expressed the idea of the practitioner as an authority for the client, a theme that was fairly prominent for the entering students. Moreover, the postdidactic students’ statements reflected more moderate beliefs in the authority of research; they described the limits of research evidence. Overall, the postdidactic students appeared to have a clearer understanding of the EOC used by occupational therapy practitioners, more commonly recognizing the need to consider contextual variables and vary treatment approaches accordingly, to be client centered, and to use multiple knowledge sources to make intervention decisions.

In summary, the evidence suggests that the postdidactic students’ EOC was more sophisticated than the entering students’. Although beliefs that are characteristic of the skeptic were evident in both groups, the entering students demonstrated some evidence of dogmatist views and little evidence of rationalist beliefs, whereas statements suggesting a rationalist position were more evident in the postdidactic group, and their occupational therapy–specific ontological cognition was more sophisticated than that of the entering students.

Implications for Theory, Education, and Research

This study’s findings have the following implications for occupational therapy theory, education, and research:

- Occupational therapy students demonstrated more sophisticated ontological cognition than that of the realist.
- A developmental trajectory is likely for both domain-general and domain-specific EOC, with ontological cognition evolving first.
- Further clarification of the factors making up ontological cognition seems warranted; the EBI SCK scores differed significantly between entering and postdidactic students, and both groups tended to address themes related to Certain Knowledge more than those related to Simple Knowledge.
- Greene et al.’s (2008) timetable for attaining the rationalist position in domains such as occupational therapy was not supported because evidence of dogmatism and skepticism were apparent; however, Muis et al.’s (2006) hypothesis that simultaneous study of both well-structured domains and less-structured domains might interfere with the development of EOC was potentially supported.
- Longitudinal research is needed to confirm whether participation in an occupational therapy program contributed to the differences in students’ occupational therapy–specific EOC at entry and at the end of the didactic portion.
- Case-based assignments and evidence-based decision-making may be challenging for students with more naive EOC.
- Knowledge of students’ EOC could provide a lens through which educators might interpret students’ learning difficulties and identify effective remedial approaches.
- Inclusion of probing questions and an objective measure of personal justification could help elucidate occupational therapy students’ epistemic cognition and reveal subtle differences between novice and more experienced students.
- Longitudinal studies of domain-specific and domain-general EOC could shed light on the developmental trajectories and relationships between the two.
- Future research could examine the relationships between measures of achievement and EOC.
- Studying EOC during both didactic coursework and fieldwork might reveal the relative contributions of the experiential versus didactic aspects of an occupational therapy program to the development of EOC and offer evidence to determine whether curricula provide the educational context and rigorous study that promote change in these beliefs.
- Research examining the relative effectiveness of instructional methods may help identify efficacious techniques for facilitating development of occupational therapy students’ practice epistemology.

Study Limitations

This study found differences in the EOC of entering and postdidactic occupational therapy students, but whether these changes were a result of the program cannot be determined on the basis of these data. Evidence from longitudinal research examining changes in a single cohort of occupational therapy students is needed to corroborate and strengthen these findings.

Generalization of these results is limited because of the small convenience sample from one occupational therapy program in the southeastern United States. Moreover, the participants were primarily White women, and some researchers have found differences between the EOC of
men and women (Baxter Magolda, 2002). Nevertheless, the program has entry requirements that are similar to other occupational therapy programs across the United States, and all programs adhere to the same standards for accreditation. Occupational therapy is also a female-dominated profession.

Although self-report is an accepted method for measuring EOC, potential limitations are inherent in this approach. For example, the students’ responses could have been skewed by response bias. The restriction of range in scores on the EBI, its relatively low internal consistency reliability, and the lack of reliability and validity evidence for the mFQS may also have introduced measurement error that could have affected the results. Moreover, the EBI does not include a personal justification factor; therefore, it did not allow for direct measurement of this aspect of general epistemological cognition. Because no single measure of EOC with strong psychometric properties is currently available, a variety of methods, including narrative data, were used.

Inclusion of focus groups, interviews, and member checking would have strengthened the trustworthiness of the narrative data. Nevertheless, I implemented several strategies to ensure its trustworthiness, including triangulation through the use of both quantitative and qualitative measures and procedures to ensure honesty in the students’ self-reports. Data sources were also triangulated because all but two of the potential participants took part in the study.

**Conclusion**

The goal of occupational therapy programs is to prepare competent entry-level practitioners who understand and use the practice epistemology that characterizes the discipline of occupational therapy. This study suggests that students made progress toward this goal during 18 mo of didactic coursework in an occupational therapy program. Clearly, further research is needed related to the EOC of occupational therapy students, the effects of various didactic and fieldwork experiences on its development, and its contributions to achievement in occupational therapy education and practice.

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**References**


