

During the last two years SAJOT has seen a substantial increase in the number of articles submitted which has turned us from a 15 page edition into a one hundred page edition (this edition). Congratulations are extended to the South African research community for enabling SAJOT to achieve this milestone. SAJOT does however need to extend its article base from mainly local work (that includes undergraduate students' research projects) to include research from a wider more international research community. The Editorial committee therefore needs the help of the South African occupational therapists to recruit research articles from their colleagues in other countries for publication in SAJOT.

This edition was planned originally as a celebratory one for the **Occupational Therapy Department at the University of the Free State (UFS) which celebrates its 40th Birthday this year**. Due to the funding requirements for publications laid down by the Department of National Education (DNE), it will no longer be possible to publish editions consisting of articles from one institution only if funding is sought from the DNE. As a celebratory edition had already been planned it was decided that articles from the UFS would be spread out over the year, and published together with articles from other sources. This edition contains seven articles to celebrate this anniversary. The Guest editorial prepared by Tania Rauch van der Merwe provides some history of the UFS Occupational Therapy department department¹ **.

The journal opens with a Scientific letter which looks at aspects of job satisfaction among occupational therapists in Government Hospitals in one district of Kwa Zulu Natal². It is gratifying to note that the respondent therapists rated satisfaction with the nature of their work the highest. However the issue of salaries and promotional opportunities has again been raised.

In the second article, the value that a rural clinical experience has for final year undergraduate occupational therapy students^{3**} is reported. Since the 1980's when the Occupational Therapy Department at the University of the Witwatersrand first sent students to rural areas for clinical training purposes several other South African Universities have followed suit. Unfortunately there is a paucity of studies reporting on the evaluation of this ground breaking work and training. So it is interesting to be given the perspectives of students, now some twenty eight years later. The four themes identified in this research summarise the feelings of the students towards clinical practice in a rural settings as follows: "I learned to work with people on their level..."³ **; "I learned about empowering communities to function more independently", "I learned to use my personal strengths and resources, as well as the importance of time management". This article will go a long way to filling the gap in the literature.

Three articles report on research that involved children. The first one being, "The prevalence of sensory integration in premature infants in a tertiary hospital in Bloemfontein"⁴ **. According to the results of the research only 66.7% of this population presented with normal sensory seeking behaviour thus indicating the need for intervention at a very early stage in the remainder of the research population. It is postulated that intervention in this group of children at an early stage could prevent "...escalating behavioural difficulties and developmental delays"^{4:20}. The second and third of the articles reporting on research with a paediatric population presented different aspects of a stimulation programme developed specifically for use in providing occupational therapy for children with Downs syndrome up to the age of two years. The first of these studies provides information on the impact that this specially constructed

programme made on the developmental status of the child^{5**} and the second one^{6**} provides guidelines for the required number of sessions and the optimal length of each intervention session for the child⁶. Both these studies make use of the specifically developed programme which could be of use to all occupational therapists working with these and other children with potential developmental delay. Moreover the programme was developed specifically to provide parents with the relevant activities to develop the full potential of their child.

A research project with a very different theme i.e. the use of music tempo in the treatment of mental health care users diagnosed with a psychosis⁷ ** is also presented. The results indicate that although fast or slow music had the potential to improve attention when used according to the symptoms (ie agitation or inhibition) it did not have an effect on the willingness of the patient to participate in activities. The authors feel that, in a client group that often presents with challenges in treatment, the use of music as described is a step in "getting closer to assisting these clients to engage in meaningful occupation"^{7:25} **.

An article looking at the time and space dimensions of computer lap-top use among students⁸ ** demonstrates very clearly that there are a variety of positions used by students while working on a lap-top or other devices such as an ipad. It was also found that there were quite a few differences in the time that students spend on their electronic devices. The authors indicate that this study could act as an introduction to further work that examines the musculo-skeletal implications of the three preferred positions which can be of relevance to occupational therapists.

An article that is of interest to the practice field of vocational rehabilitation is one that examines the opinions of occupational therapists on the positioning of vocational rehabilitation in Gauteng's public health care units^{9**}. It is interesting that there is consensus that vocational rehabilitation should be provided within public health care but there was no consensus on exactly what this service should include. Therefore some other means will have to be used to determine the exact nature of this service should it be offered at this level of health care.

An interesting article¹⁰ looks at the meaning and purpose that young men in Cape Town's "gangland" derive from their participation in gang activities. As the authors state it is important for occupational therapists to understand the reasons behind gang involvement if they are to offer programmes that support and help young people to disengage from gangs and find alternative occupations. Also based in the community setting is an article¹¹ that examines the subjective experiences of clients' participating in rehabilitation at an out-patient community rehabilitation center, in Cape Town. It is to the credit of the therapists that the clients involved in the study expressed a high level of satisfaction with the services offered and felt that the knowledge and skills that they had had gained enabled them to be more independent in their activities of daily living. Another article examined the perceptions and experiences of the care-givers of older adults with chronic diseases¹². This study indicated the occupational imbalances of these care-givers. It also provides information on the coping strategies that they use and the barriers that were found to have a negative effect on the care-giving role. This information will help in the provision of a "supportive partnerships between occupational therapists and family care givers.

An article that examines "...how comprehensively occupational therapists documented... their assessment and treatment of the clients for which they were responsible"¹³, follows. As these docu-



ments may be used not only to provide the evidence of effective practices but also for legal purposes, accurate and complete record keeping is an important part of patient intervention. It is therefore rather disappointing that it was found, through the use of a well-constructed audit check list that, overall the records were of poor quality. As the authors of the article state, this has severe ethical and legal implications, in addition to the problem of the lack of practice based evidence. It is therefore clear that the education of our therapists, both at undergraduate level and in continuing professional development, must deal comprehensively with the need for accurate and regular documentation regarding patient intervention.

The last of the scientific articles points out that limited research has been conducted with occupational therapy students using spirituality scales. Spirituality forms an important part in occupational performance and therefore the use of measurement scales with undergraduate students and clients can point out areas for emphasis in education as well as treatment particularly, as mentioned by the author, in a “spiritually diverse” country such as South Africa. The authors therefore set out to examine the internal consistency of the three scales mentioned. If found to be consistent they could be used to help determine the input in this particular field to undergraduate students. It is the useful to know that the scales were found to be reliable.

The Journal concludes with an interesting Opinion Piece which looks at the pros and cons of using a mixed methods study design for research. There is a valuable discussion on this type of study design and whether it is suitable for undergraduate and masters level research. The conclusion is that experienced researchers would be the group most able to use mixed methods in research and is therefore not suitable for undergraduate and masters level students.

Lastly I would like to point out that the **instructions to authors** (see page 91) have been updated with more information being provided about the way in which confidentiality of the review process can be better insured. **Instructions to reviewers** (see page 99) have now also been included in the journal.

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** Articles commemorating the UFS anniversary

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