

Original Article

# Sociological consciousness: a concept analysis and implications for occupational therapy

## *Consciência sociológica: uma análise conceitual e implicações para terapia ocupacional*

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### **Abstract**

This article explores *sociological consciousness*, a framework of thought proposed by Peter Berger, and its potential value for occupational therapy. This article explores how Berger's four motifs (debunking, unrespectable, relativization, and cosmopolitan) of sociological consciousness can be taught as a process to help occupational therapists frame their thinking when approaching various clients and situations. The current study answers three questions: "What is sociological consciousness?", "Is sociological consciousness valuable?", and "Is sociological consciousness applicable to occupational therapy?" Wilson's method of concept analysis is used to understand this topic and its practical applications to occupational therapy. Using the Wilson method of analysis to break down the components of this concept, compare it to similar and contrary cases, and explore its social context, the findings suggest that sociological consciousness is relevant to occupational therapy and warrants inclusion in practice, research, curriculum, and continuing education. Sociological consciousness adds depth to clinical reasoning and promotes critical thinking and reflection on implicit biases which may negatively influence therapeutic interactions with clients.

**Keywords:** Concept Analysis, Occupational Therapy, Professional Training, Sociological Factors, Critical Thinking.

### **Resumo**

Este artigo explora a *consciência sociológica*, um quadro de pensamentos proposto por Peter Berger e seu potencial valor para a terapia ocupacional. Este artigo explora como os quatro motivos de Berger de consciência social (desmembramento, desrespeitabilidade, relativização e cosmopolitismo) podem ser ensinados como um processo de apoio aos terapeutas ocupacionais no processo de racionalização da interação com diversos pacientes e situações. O presente estudo responde a três perguntas: "O que é consciência sociológica?", "A consciência sociológica tem

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valor?” e “A consciência sociológica é aplicável à terapia ocupacional?” A análise conceitual do método de Wilson é utilizada para entender este tópico e suas aplicações práticas à terapia ocupacional. Utilizando o método de análise de Wilson para destrinchar os componentes deste conceito, os resultados sugerem que a consciência sociológica é relevante para a terapia ocupacional e garante inclusão na prática, pesquisa, curriculum e educação continuada. A consciência sociológica agrega profundidade à análise clínica e promove o pensamento crítico e reflexões em desvios implícitos que podem influenciar negativamente as interações terapêuticas com os pacientes.

**Palavras-chave:** Análise Conceitual, Terapia Ocupacional, Treinamento Profissional, Fatores Sociológicos, Pensamento Crítico.

## 1 Introduction

The purpose of a concept analysis is to clarify and understand a specific concept by following an established method designed to better understand the subject and its application. Concepts, as defined by Penrod & Hupcey (2005, p. 404), are “[...] empirically-based abstractions of reality or truth”. Often concepts are abstract in nature, therefore, a concept analysis is helpful to gain a better understanding in context. The power of a concept analysis is to identify existing theories and definitions of a concept and synthesize those into a more cohesive view of the chosen topic (Penrod & Hupcey, 2005).

In the profession of occupational therapy, historically there has been an emphasis on quantitative research, while minimizing or overlooking the value of qualitative research. Occupational therapy (and healthcare in general) has historically placed emphasis on the biological and technical aspects of practice, often failing to recognize the importance of psychosocial aspects (Wear & Castellani, 2000). Some researchers and educators argue that concept analyses, as a type of narrative or qualitative inquiry, have no use within occupational therapy research (Draper, 2014). Qualitative research can, however, offer a deeper understanding and insight into problem areas and develop ideas to improve occupational therapy education, research, and practice. Concept analyses clear the ground for qualitative studies and serve the purpose of “[...] advancing science rather than simply imagining what a concept could be or constructing what we believe it should be” (Penrod & Hupcey, 2005, p. 409). Instead of exploring a concept to advance a pre-conceived theory, the structure of a concept analysis aids in removing potential bias to view the concept more objectively. Traditionally, only nursing scholarship regularly utilizes concept analyses, while few other health professions have embraced this form of research. However, concept analyses situated prior to formal research have the potential to have great utility in occupational therapy education, research, and practice. A concept analysis can serve as a method of identifying an unclear area of interest and laying the foundation for further research.

The concept analysis we perform here focuses on the idea of *sociological consciousness*, a way of viewing and understanding interactions and relationships within society proposed by Peter Berger (1963) in *Invitation to Sociology*. Berger was a renowned

sociologist who authored over a dozen books, including *Invitation to Sociology*, which is a staple of sociological education and has been translated in over twenty languages (Baehr, 2013). Sociological consciousness has been explored in the field of sociology, but has not yet extended to uses within other healthcare professions, including occupational therapy. While there exists no literature applying this concept to occupational therapy, sociological consciousness has the potential to be an important theoretical context for education, research, and practice.

## **2 Method**

The current concept analysis uses the Wilson method to elaborate on the idea of sociological consciousness (Wilson, 1963). Alternative methods of concept analysis exist, however they are not all of equal value in analyzing a specific topic. In comparing several methods of concept analysis, we determined that the Wilson method, and its outlined process, fit the concept of sociological consciousness best (Rodgers, 2000; Walker & Avant, 2005). Wilson's book, *Thinking with Concepts*, clearly outlines eleven steps of his concept analysis (Wilson, 1963). Here we use a slightly modified version which includes the relevant steps to the topic at hand. The steps in Wilson's [modified] concept analysis are: 1) Isolate the Concept, 2) Find the Right Answer, 3) Model Case, 4) Related Case, 5) Contrary Case, 6) Social Context, and 7) Practical Results.

## **3 Results**

### **3.1 Isolate the concept**

The first step in Wilson's concept analysis is isolating the concept and developing boundaries for the topic. This entails determining the difference between questions of concept and other questions. Most questions involve not only conceptual analysis, but also factual and value-based analysis (Wilson, 1963). To truly conduct a conceptual analysis in its purest form, we must break down the question into component parts and remove any aspects of fact or value from the question. Fact is something that is or is not, so questions of fact are binary in answer. An example of a question of fact is "do you need formal education to become an occupational therapist?" This question can be answered with a yes or no and supported by evidence. Values involve questioning whether something is good, bad, desirable or undesirable (Wilson, 1963). Values are less binary than facts, and the answers to these questions are more subjective and located along a spectrum. A question of value may be "is occupational therapy important?" A question of concept is, by definition, "[...] concerned with the uses of words, and with the criteria or principles by which those uses are determined [...]" (Wilson, 1963, p. 11).

In the current analysis, the question of concept is "is sociological consciousness applicable to occupational therapy?" It is not a question of fact, value, definition, or meaning. This question cannot be answered factually, nor does it involve strong value-based components. To further explore this question, we do need to examine facts, values, and definitions before we can understand the concept. Broken down, our

conceptual question has several sub-questions that we must address: 1) What is sociological consciousness? 2) Is sociological consciousness valuable? and 3) Is sociological consciousness applicable to occupational therapy?

### 3.2 Find the right answer

Wilson's second step is finding the "right answer." This step entails addressing definitions, facts, and values that distract from the question of concept. When asked "is sociological consciousness applicable to occupational therapy?", the responses may be "well, it depends on what you mean by sociological consciousness. If you mean X, then yes, but if you mean Y, then no" or "which professions are you including in occupational therapy?" The question needs to be more clearly defined, and parameters set. First, we will develop a working definition of sociological consciousness by separating it from alternate definitions. According to the dictionary definition, *sociological* is "oriented or directed toward social needs and problems," while *consciousness* is defined as "the quality or state of being aware of something within oneself, an external object, state, or fact." *Social consciousness* is "awareness of important social issues." These definitions help to understand certain components of sociological consciousness, but none reach the full meaning of the concept.

According to Berger (1963), sociology is a concerted attempt to understand the doings of humans, and a sociological perspective allows for a truly unique view of the world. Once adopted, a sociological view cannot be segregated from regular consciousness, as humans interact with and live in a social world. *Sociological consciousness*, therefore, is a shift in normal awareness of the world which incorporates this sociological view into all interactions.

The purpose of sociological thought is "[...] at least partly grounded in the need to bring order and intelligibility to the impression of chaos [...]" (Berger, 1963, p. 42). To eliminate value from this question of concept, note that sociology is inherently a value-free practice. Sociology is an attempt to understand, not to assign the labels of positive or negative to anything observed. Therefore, using sociological consciousness is not a judgmental or value-based exercise. The question of concept is not questioning whether sociological consciousness is good or bad, meaningful or worthless; instead it is asking whether it can or cannot be applied and utilized in occupational therapy.

### 3.3 Model case

The model case chosen to illustrate the important features of sociological consciousness is Peter Berger's *Invitation to Sociology* (Berger, 1963). Although dated, this book is a classic reference in the field of sociology. Within the book, Berger eloquently describes the specific and unique process through which sociologists think about and view the world around them. He depicts the scientific nature of sociological methodology, while also inviting readers, sociologists and laypersons alike, to partake in this method of thinking. Sociological consciousness, as outlined in this model case, is quite abstract in nature. It is a way of thinking, therefore, the book has a metacognitive theme that can make it difficult to conceptualize. "The sociological frame of reference

is but another system of interpretation that can be applied to existence” (Berger, 1963, p. 63).

Sociological consciousness can, however, be applied to concrete real-life situations. For example, sociological consciousness is a way of thinking about specific situations, such as homelessness. Currently, there is stigma surrounding the homeless population, but by using a sociological consciousness framework for approaching this problem, one would look at the idea more holistically and therefore minimize the surrounding stigma. The thinker employing this process could utilize the outlined motifs to think beyond any preconceptions. In presenting this model case, it is imperative to extract the essential features of the concept within the context of the case. Berger presents four motifs, which are the backbone of his proposed sociological thought. The motifs provide an outline for how to integrate sociological consciousness, and are as follows: 1) debunking motif, 2) unrespectable motif, 3) relativization motif, and 4) cosmopolitan motif (Figure 1).



**Figure 1.** The four motifs of sociological consciousness.

The debunking motif is inherent to sociological consciousness. Sociologists, and those using a sociological thought process, tend to “unmask” the social processes they observe. This tendency is not due to the psyche of the sociologist, but instead is part of the methodology necessary to employ this type of thinking, regardless of disposition or assumptions held by the individual. Berger considers debunking an essential sociological instrument, a way to deconstruct certain aspects of society in order to rebuild it as a more humane view of the world (Baehr, 2013). When employing the debunking motif, a thinker breaks down assumptions, facades and judgements to see the whole situation as it truly exists.

Second is the unrespectable motif. Berger suggests that in any society, there are two distinct sectors that can be seen across people, places, and communities: respectable and unrespectable (Berger, 1963). Anyone or thing aligning with typical middle (or upper) class ideals, language, jobs, and culture is seen as 'respectable.' Anything differing from these values is considered 'unrespectable', and here we use the term in this context only and clearly not as an endorsed label. 'Unrespectable' includes large groups of people falling below the poverty line, entire communities, and certain professions. The unrespectable motif involves detaching oneself from the powerful and respectable aspects of society (Psathas & Schutz's, 2004). The individual employing sociological thought crosses the line into the 'unrespectable' by the very knowledge and understanding that the status quo is not the only acceptable course of action. The nature of thinking sociologically means that one cannot solely entertain so-called respectable thoughts, but must strive to understand all people and interactions, even if they occur in the 'unrespectable' sector.

Berger's next motif is the relativization motif, which suggests that in the modern era, we are surrounded by many alternative ways of looking at the world. Historically, individuals had pre-determined and unchanging roles in society. In many cases, social stratification was permanent, with little hope of movement, leaving people with one static view of society. In today's world, there is a great amount of social mobility. Roles and social standing are constantly shifting, allowing for a greater exposure to different ways of looking at the world. With this, sociological thought is accompanied with an understanding that everything is relative; what one person considers polite may be a social error in another community. Relativization is the idea that all social rules are constructed by humans and are, therefore, relative to other constructed social rules (Hobbs, 1993). A sociological thinker must be able to alternate between meaning systems and realize that interpretations made in one meaning system are relative to another.

The final motif is cosmopolitan. Berger points out that in ancient times, thought was cultivated between people as cities developed. A cosmopolitan consciousness developed within these ancient towns as culture, inventions, and new ideas were shared between citizens and scholars. An individual employing sociological thought must roam "[...] through the whole wide world in his intellectual voyages [...]" (Berger, 1963, p. 53). The journey can be figurative in nature, but one must be comfortable wherever others are thinking and sharing ideas. Sociological consciousness shares in this same cosmopolitanism, where thoughts must be transient and the thinker should be inclined towards intellectual "cities". Part of thinking sociologically is striving to understand how social facts in a particular society guide or govern peoples' lives (Falk & Molloy, 1985). By sharing information and learning more about how other cultures interpret society, this aids in the employment of the other motifs. A cosmopolitan way of thinking compliments the other three motifs, as this motif encourages further debunking of society, merging into the unrespectable sector, and understanding of relative meaning systems.

These four motifs provide an outline of the components that define sociological consciousness. They are broad enough to go beyond the field of sociology itself, with potential to be employed by anyone willing to explore this way of thinking and knowing. The motifs are also specific enough to give instructions about the

commonalities in this method of thought. When sociological thought is employed, we work towards a world where people are more understanding of the complexities within human interactions and societal arrangements.

### 3.4 Related case

To better illustrate the main points of our model case, we will present a related case. Mills (1959) is another influential sociologist, and his book *The Sociological Imagination* has many points that are similar to *Invitation to Sociology*. Like Berger, Mills uses history to illustrate the basic themes of modern society. Mills suggests that sociological imagination involves a continual review of thoughts and experiences, much like sociological consciousness. His definition of sociological imagination is “[...] to understand what is happening to themselves as minute points of the intersection of biography and history in society” (Mills, 1959, p. 7). Mills’ sociological imagination allows for the distinction and connection between personal struggles and societal issues, which aligns well with Berger’s debunking motif. Mills suggests that those employing sociological imagination are able to decipher the many dualisms of human life and interpret the multiple layers present in any situation or person to develop a holistic evaluation (Machum & Clow, 2015). A common theme between both cases is that sociological thought is a unique and different way of viewing the world, yet anyone can engage in this way of thinking. Any time an individual takes a step back from their normal, ingrained way of thinking to examine relationships within society and how they connect on a larger scale, sociological thought is employed to some degree. Both sociological consciousness and sociological imagination involve engaging in a broader, objective, and relative way of thinking about an issue.

### 3.5 Contrary case

Wilson’s method of concept analysis also involves presenting a case that opposes and differs significantly from the model case. In doing so, it differentiates sociological consciousness from examples that are *not* the isolated concept (Wilson, 1963). The contrary case, also from the field of sociology, is introduced in *The Rules of Sociological Method* by Emile Durkheim (1982). The primary difference between sociological consciousness and the sociological method proposed by Durkheim is that sociological consciousness is a frame of reference, while the sociological method is a proposed scientific process. Sociological consciousness is a way of thinking that can be applied to any thought process, in any situation. Durkheim’s sociological method involves a scientific process, as it was his goal to explain that sociology was a rigorous science, which can be conducted objectively with empirical evidence. The sociological method is an instructive methodology for how to conduct sociological research. Durkheim (1982) sets forth steps and rules for the sociological method, which include guidelines for the observation of social fact, distinction of the normal from the pathological, constitution of social types, explanation of social facts, and demonstration of sociological proof. This method is a stand-alone process of sociology. It is more difficult to apply this concept to non-sociological related processes, while a sociological frame of reference, such as sociological consciousness, can be applied to any process.

### 3.6 Social context

To answer the question of concept, “is sociological consciousness applicable to occupational therapy?”, one must consider how sociological consciousness might be situated within the social context of occupational therapy settings. In many healthcare settings, occupational therapy has focused on physiological processes and the pathology of disease. The goal is to treat physical illness and return a person to health within a curative mindset. This practice assumes that the knowledge and methods of occupational therapy are closely associated with biological science (Wear & Castellani, 2000). The traditional biomedical perspective, however, has not always explicitly and intentionally considered the mediating role of the environment, particularly the social context, in affecting the health of people and populations. To outline the larger social context of occupational therapy, we briefly address two interrelated issues. First, what impact do social factors play in the health of a given individual or population? Second, what is the influence of the two major foundational theories and philosophical underpinnings of occupational therapy: the scientifically-driven paradigm of traditional biomedicine and the more interpretive nature of narrative and qualitative methodologies?

Occupational therapy, as a point-of-service phenomenon, always takes place in social situations; even the one-on-one patient and therapist encounter is ripe with social nuances. Likewise, contemporary occupational therapy has witnessed an increasing development of community-based services and population health initiatives. As such, occupational therapy service delivery is always- albeit sometimes subtly- impacted by a wide variety of social factors, or social determinants of health. Social determinants of health include socioeconomic status, social support, education, employment, gender, and culture, amongst others (Braveman & Gottlieb, 2014). The idea that social conditions influence health in significant ways is not new and has been cited as early as nearly two hundred years ago (Link & Phelan, 1995; Virchow, 1848). Indeed, Link & Phelan (1995, p. 82) argued that evidence “[...] clearly establishes a strong and pervasive association between social conditions and disease”. Similarly, Marmot (2005) suggests that both the causes and potential solutions to disease and chronic health conditions lies within a socially-mediated paradigm. Sorensen et al. (2003, p. 189) noted that “[...] little work has been done to date to identify methods for redressing social disparities in risk reduction interventions”. In response, Sorensen et al. (2003) developed a model to depict a conceptual framework for identifying the modifying conditions of social contexts and how those impact health behavior interventions. Their goal was to design socially-informed interventions which were relevant and meaningful to the intended participants. In sum, the literature is clear that the social context is a critical consideration in impacting and improving the health and wellbeing of individuals and populations.

The underlying ideological, theoretical, and philosophical foundations of occupational therapy (and healthcare in general) have informed not only the provider-patient encounter, but also the entire supporting infrastructure, including research, education, health policy, insurance, and reimbursement. Westerhaus et al. (2015) discuss the role of professional education as a means to better address social determinants of health and suggest a biosocial training model

to prepare practitioners for effective and inclusive provision of services. Rapheal et al. (2008) detail the role of discourse and ideology in healthcare, noting that the ways people understand and discuss issues, as well as the ideas they hold about health and illness, form the basis for decisions made about policies, research, and interventions. Traditional health sciences have mostly relied on reductionist (quantitative and statistical) approaches to understanding health, view health as a consequence of individual actions, and tend to separate health issues from the sociopolitical environment which impacts them most (Rapheal et al., 2008). In their discussion of health inequalities, McCartney et al. (2013, p. 225) suggest that such inequalities “[...] will persist unless their actual causes (socioeconomic circumstances and the political processes and choices which determine them) become the key focus of action”. It is clear that ideologies which influence mindsets, political action, education, and research are complex and institutionally-rooted elements of the social context of occupational therapy.

Ideally, it is the responsibility of all occupational therapy professionals to treat the whole person- physically, mentally, and emotionally. However, in certain practice and research settings, occupational therapy sometimes underutilizes the social sciences, which is beneficial in facilitating communication and trust-building with clients (Wear & Castellani, 2000). As occupational therapists know well, many factors contribute to a person’s overall wellbeing, and if only the physical factors are considered, we fail to see a large portion of an individual’s health. While occupational therapists are educated to view each person through a wide-angle lens, explicit attention to content related to social determinants of health is not always present. Sociological consciousness is a frame of reference for identifying and addressing social determinants of health and offers occupational therapy providers a tool to inform and enrich interactions with their clients.

#### **4 Discussion**

The final step of Wilson’s modified concept analysis is exploring the practical results of the concept: how sociological consciousness can be applied to occupational therapy education, practice, and research. If occupational therapy professionals practice sociological consciousness and integrate it into the way they think about each patient, it will benefit their clients, as well as make it easier for the practitioner to better understand what their clients need to achieve wellness. Including the four motifs in each case review will give a more complete, unbiased, and relative view of that client’s health status. In first using the debunking motif, occupational therapy professionals are cued to put aside common assumptions or biases they may hold about a patient. An example is the assumption that a patient who walks through the door unable to walk in a straight line and with a delayed reaction time is under the influence of a substance. In fact, those symptoms are also true of a person with Parkinson’s disease, and by utilizing the debunking motif, the occupational therapy professional would put their automatic assumptions to the side to explore the true cause, without letting bias interfere with treatment.

Using the unrespectable motif, occupational therapists must acknowledge their privilege and power, and move beyond those to explore all parts of society. All people,

no matter how rich or poor, have a right to health and wellness. Disease does not discriminate, and all people need healthcare (including occupational therapy) in some form. Occupational therapists and other medical professionals typically belong to the 'respectable' sector of society, as they are educated and inhabit commonly accepted, valued professions. Like sociologists, occupational therapists must sometimes cross into so-called 'unrespectable' sectors when they work in certain communities or with certain populations. Not all occupational therapy professionals fully cross this border, allowing their knowledge and privilege to hold them above the people that they work with, ultimately impeding the quality of care that they give. Using sociological consciousness as a framework for treatment, occupational therapists recognize the sectors and allow themselves to cross the border into 'unrespectable' to benefit their clients. Recognizing and embracing this border between 'respectable' and 'unrespectable' could eventually minimize the negative impact of differing sectors. When commonly respected individuals, such as physicians, are comfortable on the same level as the clients they treat, it brings previously excluded populations into the 'respectable' sector where all people belong.

The relativization motif allows occupational therapy professionals to understand that everyone's view and approach to life is relative. It encourages the therapist to view things from a broader perspective. In terms of occupational therapy, this motif helps occupational therapists to incorporate culture, socioeconomic status, and other factors into their view of a patient. To the occupational therapy professional, it may be frustrating that a patient is not complying with a treatment, but from the patient's perspective, it is frustrating that their physician is prescribing a treatment that goes against their beliefs. Viewing the client's case through a relative perspective allows the occupational therapist to develop the treatment plan by first looking at the situation through the client's view. The cosmopolitan motif encourages therapists to seek out other's opinions, share ideas, and include multiple stakeholders. In the context of occupational therapy, this can be applied to working as an interprofessional team to treat an individual. Gravitating towards where others are thinking and being open to new ideas allows occupational therapists to be more effective when working with other professionals to treat clients. Sociological consciousness shares similarities with emancipatory concepts such as Greene's (1978) "wide-awakeness" and Freire's (1973) "conscientizacao," or critical consciousness. Critical consciousness has traditionally been cast as a valuable intellectual tool for oppressed people. Whereas critical consciousness has the goal of praxis, or action, to effect social change, the role of sociological consciousness is to provide a conceptual foundation and way of thinking which can catalyze critical consciousness and subsequent mobilization towards social change for improving society. Framed this way, sociological consciousness can be used as a way to develop allyship to address the oppression of underrepresented or marginalized communities.

Applying the motifs of sociological consciousness to how therapists work with clients allows them to consider the whole person, not simply the physical problem. Introducing this framework in occupational therapy can be highly beneficial to both the clients and practitioners. Clients ultimately receive better care when their therapists consider all of the component factors and attempt to think from the client's point of view. This framework offers a clear way to structure how they think about a client's case to best

understand the physical, social, and cultural factors that are at play within each clinical situation (Table 1). Once an individual fully adopts this model, it cannot be easily separated from regular consciousness. Learning to engage in this method of thinking, particularly when initiated as trainee, becomes habitual over time and develops therapists who consider all aspects of everyone they treat.

**Table 1.** Application of the four motifs.

<b>Motif</b>	<b>Applicable Situations</b>	<b>Questions to ask</b>
Debunking Motif	<ul style="list-style-type: none"> <li>• Diagnosing a client</li> <li>• Understanding underlying client factors</li> <li>• Deciding upon proper treatment</li> </ul>	<ul style="list-style-type: none"> <li>• Am I looking at all aspects of this client?</li> <li>• Am I letting my assumptions influence my decisions?</li> </ul>
Unrespectable Motif	<ul style="list-style-type: none"> <li>• Working with clients who have STDs or other conditions with stigma</li> <li>• Working with low SES clients</li> <li>• Working with people who have preventable conditions (substance abuse, diabetes, smoking-related conditions)</li> </ul>	<ul style="list-style-type: none"> <li>• Am I treating this client differently than other clients because of certain factors?</li> <li>• Do I hold negative connotations of certain conditions (STDs, substance abuse)?</li> <li>• Do I treat all of my clients as peers or hold myself superior to them?</li> </ul>
Relativization Motif	<ul style="list-style-type: none"> <li>• Understanding underlying client factors (religious, political, cultural)</li> <li>• Prescribing treatment</li> <li>• Handling non-compliance with medical advice</li> </ul>	<ul style="list-style-type: none"> <li>• What are the true reasons a client is not following medical advice? Is it culturally-based opinions, religious reasons, or misunderstanding?</li> <li>• Is this prescription or treatment the right choice for a client, considering their personal factors and beliefs?</li> </ul>
Cosmopolitan Motif	<ul style="list-style-type: none"> <li>• Collaborating as a team with other health professionals</li> <li>• Keeping treatments evidence-based</li> <li>• Referring clients to other professionals</li> </ul>	<ul style="list-style-type: none"> <li>• Am I seeking all possible avenues of evidence before making a decision?</li> <li>• Do I have the knowledge and expertise to treat this client, or should I refer him/her to an available colleague that is more experienced?</li> </ul>

STD= sexually transmitted diseases. SES= socioeconomic status.

Sociological consciousness is fully complementary to accepted professional values such as client-centeredness and a systems approach to care. Sociological consciousness can influence practitioners by making them more aware of their implicit biases and how those can impact the care they provide. Thinking from a sociologically conscious viewpoint also brings into focus social determinants of health and health inequities for which therapists can advocate in legislative and policy contexts. Occupational therapy can incorporate this mode of thinking into educational programs in a variety of ways that go beyond adherence to accreditation requirements, including: creating curriculum threads which highlight the role of social determinants of health, embedding social factors into case studies and rounds, designing courses which focus on the role social factors play in health, offering experiential learning opportunities which expose students

to unfamiliar communities and populations, and integrating the core concept of sociological consciousness into mentoring and courses which address professional growth. Using sociological consciousness as a theoretical and conceptual foundation for research facilitates use of narrative and subjective methods such as photovoice, designs such as community-based rehabilitation and participatory action research, and assessments such as PROMIS (Patient-Reported Outcomes Measurement System).

## **5 Conclusion**

In conclusion, this concept analysis deconstructed the topic of sociological consciousness to build a better understanding of the concept and its practical application within occupational therapy practice, research, and education. By breaking down the essential parts of Berger's sociological consciousness and comparing it to similar and opposing concepts, this analysis answered the three aforementioned questions:

### 5.1 What is sociological consciousness?

Sociological consciousness, a shift in normal awareness of the world to incorporating a sociological view into all interactions, is a form of value-free thought. It allows the thinkers employing this method to think critically, identify their own personal judgements and values, and to view the situation or person without bias but unlimited possibility.

### 5.2 Is sociological consciousness valuable?

This concept is highly relevant to any occupational therapist who interacts with diverse clients of multiple socioeconomic, cultural, religious, and ethnic backgrounds. It is human nature to form biases based on previous experiences, and it can be difficult to shake these once they are embedded and reinforced through social institutions. The use of sociological consciousness as a framework for thought processes and clinical reasoning offers a structure for the way we consider issues, helping to remove or minimize entrenched implicit biases. The benefit that this thought process can bring to society is, therefore, incredibly valuable.

### 5.3 Is sociological consciousness applicable to occupational therapy?

Sociological consciousness has broad implications for occupational therapy, however, literature indicates that this thought process has not yet extended past the field of sociology. If sociological consciousness were to be integrated into occupational therapy education curricula as a theoretical framework for clinical reasoning, it would influence students to alter the way they think about all factors of their clients, eventually changing the way they treat their clients as future therapists. Including this framework in occupational therapy education and continuing professional development supports the shift from physiologically-based training to care of the whole person. Sociological consciousness complements any existing curriculum, while also adding an important skill to students' repertoires as developing professionals: the skill of being able to put

biases and personal values aside to put the client, their needs, and their personal factors first. This skill is difficult to teach concretely, but by offering a theoretical framework such as sociological consciousness to students, occupational therapy educators can take a step towards helping their students to develop this distinct way of thinking. Sociological consciousness enhances occupational therapy services by placing client subjectivity and social determinants of health front and center in clinical situations, providing a broad foundation to improve well-being of the whole person. Occupational therapy research must expand to include more ecologically valid methods and designs which place primacy on client's perspectives and priorities. Sociological consciousness offers scientists a theoretical framework upon which to build person-focused research agendas.

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### **Author's Contributions**

Both authors are responsible for the conception of the article and its writing. All authors approved the final version of the text.

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