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Occupational therapy labour force 2002–2003

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Symbols and other usages

Throughout this publication percentages may not add to 100 due to rounding. Where tables contain a 'not stated' category, percentage calculations exclude these figures. *Italics* within a table denote a subtotal.

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We thank the Australian Association of Occupational Therapists (OT Australia); the state branches of OT Australia in New South Wales and Victoria; and the state and territory registration boards in Queensland, South Australia and the Northern Territory, for administering the 2002–2003 occupational therapy survey. We also thank the Department of Health and Ageing for funding support for this project. In addition we thank the Australian Bureau of Statistics for demographic, labour force and health data, and the Department of Education, Science and Training for higher education data.

Most importantly we also thank the occupational therapists who took the time to complete the survey.

Main findings

- There are various estimates of the size of the occupational therapy labour force in Australia. The 2001 Australian Bureau of Statistics (ABS) Census of Population and Housing recorded 5,331 employed occupational therapists, while the 2005 ABS Labour Force Survey estimated 7,800. In 2003, membership of the Australian Association of Occupational Therapists (OT Australia) was 4,918. National figures on occupational therapist registrations are unavailable as registration is required in only four states and territories.
- The Australian Institute of Health and Welfare (AIHW), in cooperation with three of the registration boards and OT Australia, surveyed occupational therapists in 2002–2003. A total of 3,769 valid responses were received, of which 3,107 were from persons employed as occupational therapists in Australia.
- As there is no measure of the true size of the occupational therapy labour force and because the scope of the occupational therapy survey varied across jurisdictions (with registered occupational therapists surveyed in three jurisdictions and members of OT Australia in the other five) it is not feasible to weight survey responses. All of the numbers from the AIHW surveys cited in this report refer to respondents only, rather than of all occupational therapists.
- Occupational therapy appears to be predominantly a female occupation, with only 6.4% of the 3,107 employed respondents in 2002–2003 being male.
- The average age of employed occupational therapist respondents in 2002–2003 was 37.0 years.
- Most (86.4%) of the employed respondents worked as clinicians. The other main nonclinical occupational therapy fields were administration/management (6.5%) and training/education (3.9%).
- Employed occupational therapy respondents mainly worked in the public sector (72.0%), with the remainder (28.0%) in the private sector.
- About one-third (31.8%) of employed occupational therapy respondents worked in hospitals. Other main work settings included community health services (21.2%), rehabilitation services (14.0%) and private practice (9.6%).
- Employed occupational therapy respondents reported working an average of 36.2 hours per week, including 3.5 hours per week of unpaid work.
- Part-time working arrangements (less then 35 hours per week) were reported by 35.9% of the respondents, while 11.0% reported working 50 or more hours per week.
- Of employed occupational therapy respondents, 91.1% worked in metropolitan areas (Major city and Inner regional areas). This was a higher figure than the 87.2% of the national population living in those areas at that time.
- The main areas of specialty for the 2,684 respondents classified as occupational therapy clinicians were general rehabilitation (27.9%), developmental disability (18.6%) and general diagnostics (11.7%).
- Four-fifths (79.8%) of the clinician respondents were in salaried positions. The main work settings for this group were hospitals, community health services and rehabilitation services. The other main type of employment was self-employed (10.2%), with most of these respondents working in their own or group practice.

Occupational therapist population

Introduction

Occupational therapists are allied health professionals who teach people how to return to normal activities after injury or illness, using therapy and rehabilitation. They assess individuals' capabilities, develop physical or mental activities to aid the recovery from disease or injury, develop and implement intervention programs (including modifying the environment to better support participation) and promote health issues. Occupational therapists may assume different roles, such as advising on health risks in the workplace, safe driving for older adults, and programs to promote mental health for youth. They may also perform other functions such as manager, researcher, program developer or educator, as well as directly delivering professional services. Occupational therapists are generally employed in health care organisations such as hospitals, chronic care facilities, rehabilitation centres and clinics; in community centres; or are self-employed (State Government of Victoria 2005).

Occupational therapists practising in Queensland, Western Australia, South Australia and the Northern Territory need to be registered with the relevant state or territory registration board. In order to be registered, an occupational therapist in these jurisdictions must have completed an accredited degree course. Occupational therapists do not require registration to practise in New South Wales, Victoria, Tasmania and the Australian Capital Territory. However, occupational therapists in these jurisdictions who work for government-funded agencies (such as public hospitals and community health centres) are still required to have appropriate qualifications for full membership of the Australian Association of Occupational Therapists (OT Australia).

Graduate and undergraduate courses leading to careers in occupational therapy are offered in a number of Australian universities, with 774 students completing these courses in 2004 (Table A1).

AIHW Occupational Therapy Labour Force Survey

The Occupational Therapy Labour Force Survey was conducted in five states and territories in 1998 and in all states and territories in 2002–2003, with compilation and analysis by the AIHW. The scope of the survey varies across the two surveys and across jurisdictions within each survey period. The survey was administered in some jurisdictions by the state/territory occupational therapy registration board (to people registered within the state/territory), in others by OT Australia's national office (to its members), and in others by the state offices of OT Australia (to their members). The variations in scope and coverage, which are described in detail in Appendix B, should be taken into account when interpreting the data provided in this publication.

Size of the occupational therapy labour force

It is difficult to accurately estimate the number of people employed as occupational therapists or the size of the occupational therapist labour force (which includes those employed as occupational therapists and those looking for work as occupational therapists). In the 2001 ABS Census of Population and Housing, 5,331 persons were identified as being employed as an occupational therapist (AIHW 2003). A similar number – 5,400 – was estimated from the ABS Labour Force Survey in 2000, but in 2005 that survey estimated 7,800 employed occupational therapists (Table A2), an unlikely increase of nearly 50%. Unlike the census, the ABS Labour Force Survey is based on a sample and thus small numbers reported from it (such as for employed occupational therapists) are subject to relatively large standard errors (ABS 2006a).

As a general practice the AIHW uses state and territory registration data as a reasonable estimate of the size of the labour force (such as the medical, nursing and dental labour force) as these data include both employed and unemployed people registered in each health profession. However, this is not possible for occupational therapy as only four jurisdictions have registration boards for occupational therapists, and registration numbers were readily available from only three of these (Table 1).

Year	NSW	Vic	Qld	WA	SA	Tas	ACT	NT
1998			1,127	952	507			n.a.
2002			1,429	1,155	613			n.a.
2003			1,545	1,210	665			n.a.

Table 1: Occupational therapist registrations in selected states and NT, 1998, 2002 and 2003

Notes

1. NSW, Vic, Tas and ACT do not have a registration board for occupational therapy. NT has a registration board but no data were available on numbers registered.

2. Qld data are as at 30 June. WA and SA data are as at 31 December.

Source: State and territory occupational therapy registration boards.

Another estimate of the size of the occupational therapist labour force is the membership figures for OT Australia (Table 2). In 2002, membership was 5,043 and in 2003 it was 4,918. These figures are likely to underestimate the size of the labour force, as not all occupational therapists may be members of the association. The uptake of membership by occupational therapists in the labour force may also vary across jurisdictions. Looking at those jurisdictions with registration boards it is clear that not all registered occupational therapists are members of OT Australia. A comparison of the figures in Table 1 and Table 2 indicates that membership numbers are much lower than registration numbers in all three states for which registration figures are available. These issues should be kept in mind when interpreting membership data.

Table 2: Occupational therapist membership of OT Australia, 30 June 2002 and 2003

Year	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
2002	1,553	1,335	1,007	592	304	131	86	35	5,043
2003	1,534	1,307	994	530	315	119	85	34	4,918

Source: OT Australia.

The 2002–2003 Occupational Therapy Labour Force Survey was distributed to registered occupational therapists in Queensland, South Australia and the Northern Territory and to members of OT Australia in the other states and the Australian Capital Territory. There were 3,769 valid responses provided to the AIHW for analysis (Table 3). In the absence of an accurate estimate of the total population of occupational therapists it was not feasible to weight the responses to the survey. The results reported in this publication, therefore, represent only respondents to the survey, and it is not possible to state with confidence that they are representative of all occupational therapists in Australia.

Year	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1998	n.a.	735	885	551	n.a.	n.a.	53	48	n.a.
2002–2003	960	686	1,010	599	375	57	29	53	3,769

Table 3: Total number of valid responses to the occupational therapy survey in selected states and territories, 1998, and all states and territories, 2002–2003

Notes

1. Only Vic, Qld, WA, NT and ACT participated in the 1998 survey. The 1998 numbers differ from those published earlier (AIHW 2001) as they are unweighted.

2. The 2002–2003 survey was administered at different times throughout 2002 and 2003. Qld and SA conducted the survey in 2002 while other states and territories conducted the survey in 2003.

3. The population that was surveyed varies across jurisdictions. Care should be taken in comparing response numbers with registration and membership numbers (see Appendix B).

Source: Occupational Therapy Labour Force Survey, 2002–2003.

Labour force characteristics

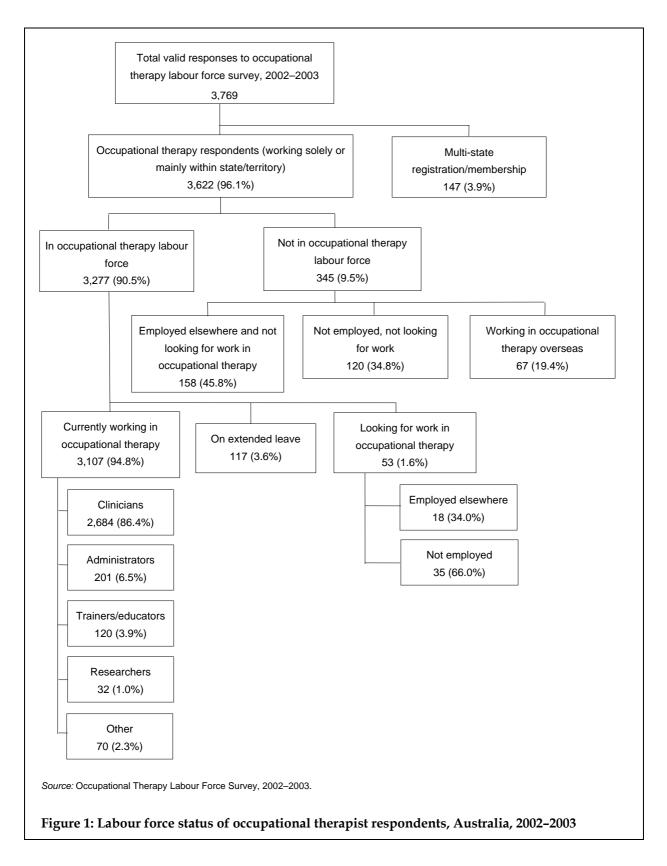
Excluding responses from occupational therapists who were assumed to be registered or members of OT Australia in more than one jurisdiction (that is, the 147 respondents who stated in the survey that they were 'working solely/mainly in another jurisdiction'), the number of occupational therapist respondents to the 2002–2003 survey was 3,622. Of these, 345 (9.5%) were classified as 'not in the occupational therapy labour force', as they were either working in occupational therapy overseas, not employed and not looking for work, or employed in another area and not looking for work in occupational therapy. The remaining 3,277 respondents were classified as 'in the occupational therapy labour force' (Figure 1).

Nearly 95% (3,107) of those respondents who were 'in the occupational therapy labour force' were working as occupational therapists at the time of the survey, with the remainder either looking for work in occupational therapy or on extended leave (Figure 1). Many of the respondents not currently employed in occupational therapy indicated that they planned to reenter the labour force (Table 4). Typical reasons given for not being in the labour force at the time of the survey were 'change in career' and 'child rearing'.

Main reason for not working in occupational therapy	Plans to enter/ re-enter the occupational therapy work force	No plans to work in occupational therapy	Not stated	Total
Not yet commenced	7	0	1	8
Retirement from the workforce	3	16	3	22
Change in career	41	76	5	122
Child rearing	76	10	2	88
Postgraduate study	9	8	3	20
Other	32	22	6	60
Not stated	1	0	10	11
Total	169	132	30	331

Table 4: Occupational therapist respondents not working in occupational therapy: main reason,2002-2003

Source: Occupational Therapy Labour Force Survey, 2002-2003.



The small number (53) of respondents looking for work in occupational therapy were generally younger than those employed in occupational therapy or not looking for work in occupational therapy (Table 5). Those looking for work were less likely to be Australian citizens, more likely

to have initial qualifications from overseas, and less likely to have postgraduate qualifications than either those employed or those not looking for work in occupational therapy.

Labour force status	Average age	% with initial OT qualification obtained overseas	% with post- graduate qualifications in OT	Average years working as an occupational therapist	% Australian citizens	Total
Employed in occupational therapy	37.0	6.6	12.4	12.1	96.9	3,107
Looking for work in occupational therapy	35.7	17.0	9.1	10.9	84.3	53
Not looking for work in occupational therapy	40.8	6.8	12.7	12.7	97.1	278
Employed, but not in occupational therapy	40.3	8.2	14.7	12.3	97.4	158
Not employed	41.3	5.0	10.1	13.1	96.6	120

Table 5: Occupational therapist respondents: labour force status by selected characteristics, 2002–2003

Note: Excludes respondents on leave, working overseas, and with multi-state registration/membership.

Source: Occupational Therapy Labour Force Survey, 2002–2003.

Comparisons of the labour force characteristics of occupational therapists in 2002–2003 to those in 1998 are problematic as only five states and territories participated in the earlier survey. However, a comparison of responses from the jurisdictions that participated in the 1998 survey (Victoria, Queensland, Western Australia, the Northern Territory and the Australian Capital Territory), with responses from the same states and territories in 2002–2003, indicates that little change has probably occurred. In 1998, 87.4% of occupational therapist respondents indicated that they were in the occupational therapy labour force, with 82.3% employed in occupational therapy. The comparable figures for the same states and territories in 2002–2003 were 88.0% and 83.1% (Table A3).

Employed occupational therapists

The remainder of this report focuses on those occupational therapist respondents who stated that they were working in occupational therapy at the time of the survey. The analysis covers the demographic characteristics of age and sex, the fields within occupational therapy (clinical and non-clinical), the work settings of occupational therapists, and the amount of hours they worked. Additional information is presented on the group identified as 'clinicians'.

Age and sex

Occupational therapists are predominantly female, with only 6.4% of employed respondents in the 2002–2003 survey being males (Table 6). The proportion of males was higher in Tasmania (10.6%), South Australia (8.8%) and Victoria (8.6%). Much higher male representation among employed occupational therapists was found in the 2000 and 2005 ABS Labour Force Surveys, 12.9% and 16.4% respectively (Table A2), although these estimates are based on small samples, as outlined earlier. By comparison, the 2001 ABS Census of Population found a similar

proportion to the AIHW survey, with 7.0% of employed occupational therapists being males (AIHW 2003:Table 9).

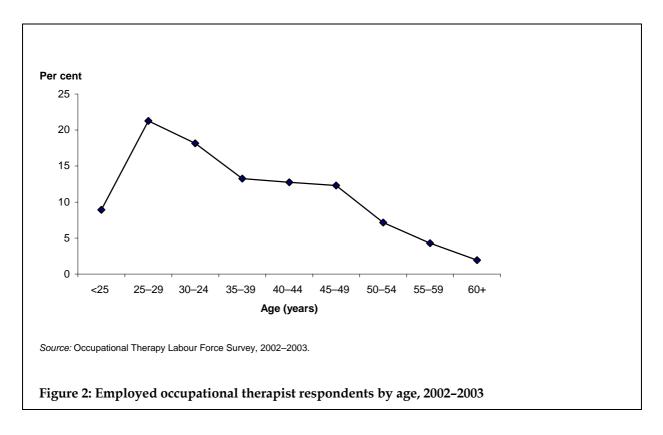
Characteristic	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Number	825	582	788	496	307	47	26	36	3,107
% male	5.5	8.6	5.1	6.5	8.8	10.6	—	2.8	6.4
Average age	36.2	37.2	37.3	37.0	37.1	40.4	40.3	33.8	37.0

Table 6: Employed occupational therapist respondents: selected characteristics, states and territories, 2002–2003

Source: Occupational Therapy Labour Force Survey, 2002–2003.

The average age of employed respondents at the time of the survey in 2002–2003 was 37.0 years (Table 7), slightly older than the finding in the 1998 survey of 35.8 years (Table A4). The average age varied little between the states and territories, except for the smaller jurisdictions with relatively few respondents. The higher average ages in Tasmania and the ACT (over 40 years) and lower average age in the Northern Territory (below 34 years) may be the result of small numbers rather than other factors.

The age distribution of respondents (Figure 2) shows a peak (over 20%) in the age group 25–29 years, with declining proportions in older age groups. The decline appears to plateau from ages 35–39 to 45–49 years, possibly a result of women re-entering work in occupational therapy after absences due to child rearing. (As already noted, most of those not working in 2002–2003 for child rearing reasons plan to re-enter the workforce at a later date.) Very few respondents reported that they were aged 60 years or over.



Fields within occupational therapy

Most occupational therapists work as clinicians, with 86.4% of the employed occupational therapists in the 2002–2003 survey stating this as the field of their main job (tables 7, A5 and A6). The remainder ('non-clinicians') worked in administration/management (6.5%), training/education (3.9%) and research or some other field (3.3%). The clinicians were younger on average than those in the other fields, possibly because jobs such as management and training require more seniority. These other fields also had higher proportions of males (except for the small number classified as researchers).

Overall, 35.1% of the employed respondents indicated that they had worked overseas as an occupational therapist, with this proportion rising to 40.1% of those working in administration/management, 50.0% of those in training/education and 51.6% of those in research (tables 7 and A7). Clinical occupational therapists were less likely to have worked overseas, possibly because, as noted above, they are younger on average than the other groups.

Field of occupational therapy	Number	% of total	Average age (years)	% male	% who have worked overseas as an occupational therapist
Clinical	2,684	86.4	36.4	6.1	33.4
Non-clinical					
Administration/management	201	6.5	40.7	9.0	40.1
Training/education	120	3.9	40.9	6.7	50.0
Research	32	1.0	40.6	3.1	51.6
Other	70	2.3	41.1	12.9	52.9
Total	3,107	100.0	37.0	6.4	35.1

Table 7: Employed occupational therapist respondents: field and selected characteristics,2002–2003

Note: Field' is based on the field of respondent's main job as reported in the survey.

Source: Occupational Therapy Labour Force Survey, 2002–2003.

A comparison of responses from the 1998 survey with those from the same states and territories for the 2002–2003 survey indicates that there has probably been little change in the distribution of occupational therapists by field (Table A3). In 1998, 87.6% of employed respondents were clinicians, compared with 85.5% in 2002–2003.

Work setting and sector

Most (72.0%) employed occupational therapist respondents reported that they worked in the public sector, with the remainder working in the private sector. Respondents employed in the private sector were slightly older on average (37.6 years) than those employed in the public sector (36.7 years), and the proportion male also was slightly higher (7.6% compared to 5.8%) (Table 8).

The survey respondents worked in a variety of settings, the most common being in hospitals (31.8%), community health services (21.2%) and rehabilitation services (14.0%). Nearly one in ten (9.6%) worked in private practice, either individually or in a group. A higher proportion of those in private practice were males (10.3%) compared to the overall male proportion of 6.4%.

Work setting and sector	Number	% of total	Average age (years)	% male	% non- clinicians
Hospital (including psychiatric and day procedure centre)	958	31.8	34.7	6.2	9.1
Nursing home/hostel	958 81	2.7	43.1	2.5	9.1 3.7
Other residential facility	18	0.6	33.6	5.6	5.6
Community health service	639	21.2	37.7	5.6	7.8
Rehabilitation service	421	14.0	35.3	8.6	11.2
Own/group practice	290	9.6	40.7	10.3	8.6
Schools	125	4.2	36.9	0.8	6.4
Tertiary education institution	97	3.2	43.0	4.1	92.8
Mining, industry or commercial sector	49	1.6	35.7	8.2	36.7
Government facility (e.g. defence forces and corrective services)	104	3.5	37.3	2.9	33.7
Charitable organisation	114	3.8	37.2	4.4	19.3
Other	115	3.8	38.1	7.8	19.1
Work sector					
Public	2,167	72.0	36.7	5.8	13.3
Private	844	28.0	37.6	7.6	14.1
Total	3,107	100.0	37.0	6.4	13.6

Table 8: Employed occupational therapy respondents by main work setting: selected characteristics, 2002–2003

Notes

1. 'Work setting' and 'sector' are based on the respondent's main job as reported in the survey.

2. Total number includes employed occupational therapy respondents who did not report their work setting/sector. However, '% of total' is calculated excluding 'not stated' work setting/sector.

Source: Occupational Therapy Labour Force Survey, 2002–2003.

Hours worked

National view

Employed occupational therapist respondents in 2002–2003 reported that they worked on average 36.2 hours per week, of which 32.7 hours (90%) were 'paid' hours (Table 9). Unpaid hours included time spent on after-hours research, volunteer work and unpaid overtime. Over a third (35.9%) said they worked part-time (defined as less than 35 hours per week), while 11.0% said they worked 50 hours or more per week. Those working in administration/management, training/education or research tended to work longer hours, with higher proportions of these working hours being unpaid.

Between the two survey periods, 1998 and 2002–2003, average total (paid and unpaid) hours worked per week (as reported by respondents) appeared to have increased by around 12%, from 32.2 to 36.2 hours (Table A4). There also appeared to be a shift towards higher proportions of respondents working 50 or more hours per week (Figure 3).

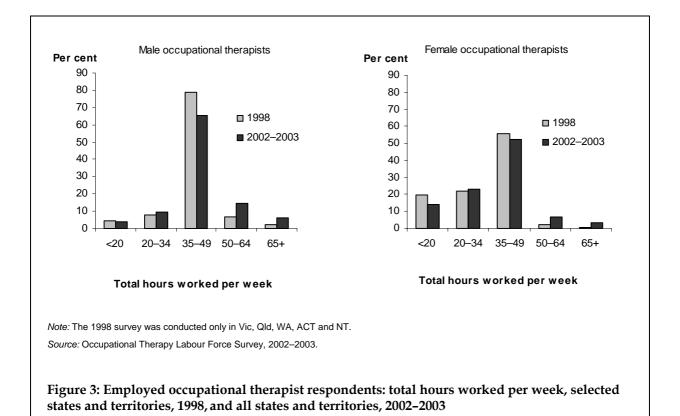
Field of occupational therapy	Average weekly total hours	Average weekly paid hours	% working part-time	% working a total of 50 hours or more per week
Clinical	35.8	32.6	36.4	9.4
Non-clinical				
Administration/management	41.1	36.2	24.1	20.5
Training/education	37.6	31.0	39.3	26.5
Research	40.6	33.2	38.7	35.5
Other	32.9	29.4	43.3	9.0
Total	36.2	32.7	35.9	11.0

Table 9: Employed occupational therapist respondents: average weekly hours worked and proportion working part-time and 50 hours or more, 2002–2003

Note: 'Field' is based on the field of respondent's main job as reported in the survey.

Source: Occupational Therapy Labour Force Survey, 2002–2003.

Most AIHW reports on the health labour force are able to provide estimates of full-time equivalent (FTE) workers, a measure of how many 35-hour week workloads are being worked. The number of FTE per 100,000 population is a standard indicator of workforce supply. However, such a measure cannot be calculated for occupational therapists as it is not possible to weight the survey responses to the total occupational therapy labour force numbers.



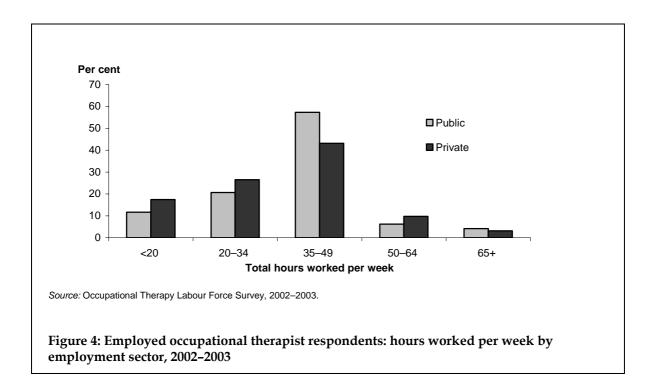


Table 10: Employed occupational therapist respondents by main work setting: average weekly hours worked, and proportions working part-time and 50 hours or more, 2002–2003

Work setting and sector	Average weekly total hours	Average weekly paid hours	% working part-time	% working a total of 50 hours or more per week
Work setting				
Hospital (including psychiatric and day procedure centres)	38.7	35.3	25.5	9.9
Nursing home/hostel	29.0	25.7	66.3	6.3
Other residential facility	31.9	29.5	35.3	_
Community health service	35.8	33.4	35.5	7.7
Rehabilitation service	37.5	33.7	32.3	13.5
Own/group practice	32.1	26.6	55.8	16.6
Schools	32.4	29.3	48.0	4.8
Tertiary education institution	41.5	33.4	33.0	36.2
Mining, industry or commercial sector	41.9	35.3	25.0	27.1
Government facility (e.g. defence forces and corrective services)	33.9	31.4	38.8	6.8
Charitable organisation	34.5	32.1	43.4	5.3
Other	34.0	29.9	42.0	11.6
Work sector				
Public	37.0	33.6	32.3	10.4
Private	34.6	30.5	44.0	12.9
Total	36.2	32.7	35.9	11.0

Note: 'Work setting' and 'sector' are based on the respondent's main job as reported in the survey.

Source: Occupational Therapy Labour Force Survey, 2002-2003.

Work hours were less for respondents employed in the private sector, 34.6 hours per week compared to 37.0 hours for those in the public sector (Table 10). This was reflected in the higher proportion working part-time in the private sector (44.0% compared to 32.3% in the public sector). On the other hand, 12.9% of private sector respondents worked 50 hours or more per week, compared to 10.4% of those in the public sector. Higher proportions of respondents in the public sector worked 35–49 hours per week (Figure 4).

Respondents who worked in hospitals (the largest group of respondents by work setting) had longer average working hours, 38.7 hours per week, than most other respondents (other than the small groups working in tertiary education institutions or in the mining, industry or commercial sector) (Table 10). They also were less likely to work part-time, with 25.6% reporting such arrangements. Respondents employed in tertiary education institutions; the mining, industry or commercial sector; and in rehabilitation services all reported working 50 hours or more per week at greater levels than the average for all employed respondents.

Regions

In 2003, 87.2% of the Australian population lived in metropolitan areas (defined as 'Major city' or 'Inner regional'). By comparison, the survey of occupational therapists in 2002–2003 found that 91.1% of employed occupational therapist respondents worked in metropolitan areas (Table 11). Those in non-clinician fields (administration/management, training/education or research) were even more likely to work in metropolitan areas than clinicians.

Field of occupational therapy	Metropolitan area	Non-metropolitan area	Total
		Per cent	
Clinical	90.7	9.3	100.0
Non-clinical			
Administration/management	95.4	4.6	100.0
Training/education	92.9	7.1	100.0
Research	96.7	3.3	100.0
Other	88.2	11.8	100.0
Total	91.1	8.9	100.0
Australian population	87.2	12.8	100.0

Table 11: Employed occupational therapist respondents: metropolitan and non-metropolitan areas, 2002–2003

Note: Areas based on the ABS ASGC remoteness classification. See 'Geographic classification' in the Glossary. *Source:* Occupational Therapy Labour Force Survey, 2002–2003.

States and territories

Because the scope and coverage of the 2002–2003 AIHW survey differed between the states and territories, the survey responses may not be equally representative of the total occupational therapy labour force in each jurisdiction. Nevertheless, some comparisons between the states and territories regarding hours worked can be drawn from the survey data. For example, respondents in the Northern Territory reported longer working hours, with higher proportions

working 50 hours or more per week and lower proportions working part-time than in the other jurisdictions (Table 12).

Increases between the two surveys in reported working hours for employed respondents, and associated decreases in part-time work and increases in working 50 hours or more per week, were consistent for all participating jurisdictions except Victoria.

Table 12: Employed occupational therapist respondents: hours worked, proportion working 50 hours or more and proportion part-time, selected states and territories, 1998, and all states and territories, 2003

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
					1998				
Average paid hours worked	n.a.	29.3	29.3	28.2	n.a.	n.a.	27.3	29.9	n.a.
Average total hours worked	n.a.	32.8	32.1	31.5	n.a.	n.a.	29.8	33.9	n.a.
% working 50 hours or more	n.a.	2.2	3.8	4.6	n.a.	n.a.	_	_	n.a.
% part-time	n.a.	39.1	38.1	44.0	n.a.	n.a.	46.3	22.9	n.a.
				20	002–2003				
Average paid hours worked	33.1	32.3	32.9	31.3	33.2	35.0	32.4	36.2	32.7
Average total hours worked	36.8	36.4	36.0	36.0	34.5	37.3	37.1	42.4	36.2
% working 50 hours or more	11.3	11.1	10.7	11.1	10.0	11.1	7.7	19.4	11.0
% part-time	33.3	40.4	34.0	37.2	40.9	24.4	30.8	19.4	35.9

Notes

1. The 1998 survey was conducted only in Vic, Qld, WA, ACT and NT. The 1998 numbers differ from those published earlier (AIHW 2001) as they are unweighted.

2. In the 2002–2003 survey Qld collected data on hours worked using a different format to other jurisdictions. As a result, care should be taken when comparing across jurisdictions.

Source: Occupational Therapy Labour Force Survey, 1998 and 2002–2003.

Some features of occupational therapist clinicians

Clinical specialty area of occupational therapy

Respondents who reported clinical occupational therapy as the field of work for their main occupational therapy job were also asked to report which clinical specialty area best described their work. Of the 2,684 employed clinical occupational therapists in 2002–2003, over a quarter (27.9%) worked in the specialty area of general rehabilitation. A further 18.6% worked in the area of developmental disability and 11.7% in general diagnostics (Table 13).

Those clinicians working in the areas of brain/head injury and acute neurology were generally younger, with fewer years experience working as an occupational therapist, than those in other work areas. Occupational therapist clinicians in the palliative care/hospice areas were slightly older on average (39.8 years of age) and had longer work experience (12.7 years).

The clinicians who responded to the 2002–2003 survey worked, on average, a total of 35.8 hours per week (Tables 13 and A8). The highest average weekly hours worked were by those in acute neurology (39.7 hours per week) while the lowest were for those working in the developmental disability, palliative care/hospice and disease based areas (33.6, 33.7 and 33.8 hours respectively). Clinician respondents working in palliative care/hospice areas were the most

likely to be working part-time (52.8%) while those in acute neurology were the least likely (21.1%).

Specialty area of occupational therapy	Number	% of total	Average age (years)	% male	Average years working as an occupational therapist	Average weekly total hours worked	% part-time
Acute hands	113	4.8	35.1	6.2	11.8	37.4	34.5
Brain/head injury	128	5.4	33.4	5.5	9.8	37.9	30.2
Acute neurology	73	3.1	31.0	6.8	6.7	39.7	21.1
Disease based	99	4.2	37.3	2.0	12.8	33.8	43.4
General diagnostic	276	11.7	36.5	5.1	11.3	36.8	34.2
Developmental disability	439	18.6	36.3	2.5	11.9	33.6	42.1
Palliative care/hospice	38	1.6	39.8	5.3	12.7	33.7	52.8
General rehabilitation	660	27.9	35.6	8.3	10.9	36.2	36.9
Other	539	22.8	37.1	6.1	12.0	35.7	35.9
Total	2,684	100.0	36.4	6.1	11.5	35.8	36.4

Table 13: Employed clinical occupational therapist respondents: specialty area of work by selected characteristics, 2002–2003

Note: Total includes 319 employed occupational therapy clinicians whose specialty area was not reported.

Source: Occupational Therapy Labour Force Survey, 2002–2003.

Employment type and work setting

Of clinicians who responded to the 2002–2003 survey, 79.8% were in salaried positions, mainly working in hospitals/day procedure centres, community health services, or rehabilitation services. The other main type of employment was self-employed (10.2%) with most of these working in their own or group practice (Table 14).

Overall, a third (33.5%) of clinician respondents were working in hospitals/day procedure centres, and a further 22.6% in community health services. The other main places of work were rehabilitation services (14.4%) and in their own/group practice (10.2%).

Overview of patients of clinicians

An attempt was made in the AIHW Occupational Therapist Labour Force Survey to collect some basic information on the clients of occupational therapists, such as the main age groups seen by occupational therapists, average waiting times, and language spoken during consultations. This provided only limited information however, mainly due to variations in the survey form across jurisdictions and a large number of non-responses.

Patient consultations

Another source of information on patient consultations with allied health professionals is the ABS National Health Surveys (NHS) (ABS 2002, 2006b). These surveys are conducted roughly every 3 years and include information on persons consulting with an occupational therapist in the 2 weeks before to the survey.

Table 14: Employed clinical occupational therapist respondents: work setting of main job and type of employment, 2002–2003

			Type of	employm	ent		
Work setting	Self- employed	Sessional/ fee for service	Contract Salaried		Locum	Total	% of total
Hospital (including psychiatric and day procedure centres)	7	n.p.	21	782	45	871	33.5
Nursing home/hostel/other residential	n.p.	4	11	74	n.p.	95	3.6
Community health service	6	4	23	524	23	589	22.6
Rehabilitation service	37	7	18	286	7	374	14.4
Own/group practice	183	25	13	37	n.p.	265	10.2
Schools	6	4	9	91	7	117	4.5
Mining, industrial or commercial	6	—	n.p.	17	_	31	1.2
Government facility (e.g. defence forces and corrective services)	n.p.	n.p.	5	58	n.p.	69	2.7
Charitable organisation	_	—	n.p.	85	n.p.	92	3.5
Other	4	4	n.p	85	_	100	3.8
Total	267	53	110	2,095	89	2,684	100.0
% distribution	10.2	2.0	4.2	79.8	3.4	100.0	

Notes

1. 'Work setting' is based on the respondent's main job as reported in the survey.

2. Total number includes employed occupational therapy respondents with a 'not stated' or 'other' work setting/type of employment. '% of total' is calculated excluding 'not stated' work setting/type of employment.

'Other' types of employment (0.4% of 'employment type') are not included in the table as a separate column but are included in the total.
Source: Occupational Therapy Labour Force Survey, 2002–2003.

Data from the ABS NHS indicate that both the number and the proportion of the Australian population consulting an occupational therapist are increasing. An estimated 50,000 people consulted an occupational therapist in Australia in the 2 weeks prior to the survey in 2004–05, an increase of 11.4% from 2001 and 133.6% from 1995 (Table A9 and AIHW 2001:Table A3). The rate of consultation with occupational therapists has also risen considerably, from 118 per 100,000 population in 1995 to 231 per 100,000 in 2001 and 247 per 100,000 population in 2004–05.

The NHS data also indicate that males are more likely to consult an occupational therapist than females (the 2004–05 rates were 286 and 210 per 100,000 population respectively). People aged under 25 years are also more likely to have a consultation with an occupational therapist than those in the 25 to 64 years age group. Due to the smaller sample numbers, estimates for people aged 65 years and over are subject to large standard errors and should, therefore, be interpreted with caution.

Appendix A: Detailed tables

Table A1: Australian citizens and permanent residents completing occupational therapy courses at Australian universities: sex and level, 1998–2004

	1998	1999	2000	2001	2002	2003	2004
Number	598	694	677	665	698	679	774
% undergraduate	89.0	85.9	87.7	88.4	89.8	85.6	82.0
% male	11.5	12.4	13.0	9.8	12.0	11.8	9.7

Note: Excludes New Zealand citizens with or without permanent residency status in Australia.

Source: Higher Education Student Data, Department of Education, Science and Training.

Table A2: Employed occupational therapists and all health workers, selected characteristics, 2000 and 2005 (ABS Labour Force Survey)

	Estimated	Number employed per 100,000	% distri	bution by	age		Average weekly hours
	number	population	<35	35–44	45+	% male	worked
Employed occupational therapists							
2000	5,400	28	63.4	24.8	11.8	12.9	34.3
2005	7,800	38	46.0	30.4	23.6	16.4	29.1
All employed health workers							
2000	451,800	2,359	31.8	31.2	37.0	26.7	32.7
2005	569,700	2,802	30.6	26.2	43.1	25.8	31.4

Notes

1. Figures for 2000 and 2005 are an average of the four quarters in each year. Estimates are based on a survey of a sample of households (ABS 2006a).

2. 'Employed' is defined according to the ABS standards (i.e. includes worked for 1 hour or more for pay; or without pay in a family business or on a farm) (ABS 2006a).

3. 'Hours worked' refers to all jobs.

4. Due to the small numbers of occupational therapists in the survey samples, estimates are subject to relatively large standard errors and should be treated with caution.

Source: ABS Labour Force Surveys, 2000 and 2005, unpublished data.

Labour force status	1998 selected states	2002–2003 selected 2 states		1998 selected states	2002–2003 selected 2002–2003 states all states		
		Number		Per cent			
In occupational therapy labour force	1,934	2,042	3,277	87.4	88.0	90.5	
Employed in occupational therapy	1,821	1,928	3,107	82.3	83.1	85.8	
Clinical	1,596	1,649	2,684	72.2	71.1	74.1	
Non-clinical							
Administration/management	117	129	201	5.3	5.6	5.5	
Training/education	61	75	120	2.8	3.2	3.3	
Research	18	17	32	0.8	0.7	0.9	
Other	29	58	70	1.3	2.5	1.9	
On extended leave	56	75	117	2.5	3.2	3.2	
Looking for work in occupational therapy	57	39	53	2.6	1.7	1.5	
Employed elsewhere	25	12	18	1.1	0.5	0.5	
Not employed	32	27	35	1.4	1.2	1.0	
Not in occupational therapy labour force	278	278	345	12.6	12.0	9.5	
Working in occupational therapy overseas	46	59	67	2.1	2.5	1.8	
Not looking for work in occupational therapy	232	219	278	10.5	9.4	7.7	
Employed elsewhere	122	119	158	5.5	5.1	4.4	
Not employed	110	100	120	5.0	4.3	3.3	
Total respondents	2,212	2,320	3,622	100.0	100.0	100.0	
Employed mainly or only in state other than that of registration/membership	60	57	147				
Total	2,272	2,377	3,769				

Table A3: Occupational therapist respondents: labour force status and role, selected states and territories, 1998 and 2002–2003, and all states and territories, 2002–2003

Notes

1. Only Vic, Qld, WA, NT and ACT participated in the 1998 survey. Numbers and proportions for that year are based on responses to the survey in those states/territories only. The 1998 numbers differ from those published earlier (AIHW 2001) as they are unweighted.

2. '2002–2003 selected states' refers to Vic, Qld, WA, NT and ACT and is provided for comparison with 1998 figures.

3. '2002–2003 all states' includes responses from all states and territories.

4. The table excludes respondents who did not answer the labour force questions.

Source: Occupational Therapy Labour Force Survey, 1998 and 2002-2003.

Characteristics	1998 selected states	2002–2003 selected states	2002–2003 all states
Average age	35.8	37.2	37.0
Average paid hours worked per week	29.0	32.3	32.7
Average total hours worked per week	32.2	36.3	36.2
% male	5.2	6.4	6.4
% Australian citizens	97.0	96.7	96.9
% born in Australia	83.4	84.4	83.9
% working in metropolitan region	88.8	88.6	91.1

Table A4: Employed occupational therapist respondents: characteristics, selected states and territories, 1998 and 2002–2003, and all states and territories, 2002–2003

Notes

1. Only Vic, Qld, WA, NT and ACT participated in the 1998 survey. Numbers and proportions for that year are based on responses to the survey in those states/territories only. The 1998 numbers differ from those published earlier (AIHW 2001) as they are unweighted.

2. '2002–2003 selected states' refers to Vic, Qld, WA, NT and ACT and is provided for comparison with 1998 figures.

3. '2002–2003 all states' includes responses from all states and territories.

Source: Occupational Therapy Labour Force Survey, 1998 and 2002–2003.

Table A5: Employed occupational therapist respondents: field of main job by states and territories, 1998 and 2002–2003

Field of occupational									
therapy	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
					1998				
Clinical	n.a.	583	566	381	n.a.	n.a.	37	29	n.a.
Non-clinical	n.a.	60	96	57	n.a.	n.a.	6	6	n.a.
Total	n.a.	643	662	438	n.a.	n.a.	43	35	n.a.
					2002–200	3			
Clinical	723	516	674	415	269	43	15	29	2,684
Non-clinical	102	66	114	81	38	4	11	7	423
Total	825	582	788	496	307	47	26	36	3,107

Note: Only Vic, Qld, WA, NT and ACT participated in the 1998 survey. Numbers for that year are based on responses to the survey in those states/territories only. The 1998 numbers differ from those published earlier (AIHW 2001) as they are unweighted.

Source: Occupational Therapy Labour Force Survey, 1998 and 2002–2003.

Table A6: Employed occupational therapist respondents: average age, field of main job, states and territories, 2002–2003

Field of occupational therapy	NSW	Vic	Qld	WA	SA	Tas	АСТ	NT	Total		
	Average age (years)										
Clinical	35.5	36.6	36.8	36.3	36.4	40.9	38.6	34.4	36.4		
Non-clinical	41.4	41.6	40.3	40.5	41.6	35.3	42.7	31.0	40.8		
Total	36.2	37.2	37.3	37.0	37.1	40.4	40.3	33.8	37.0		

Source: Occupational Therapy Labour Force Survey, 2002–2003.

	Time spent working overseas in occupational therapy						
Field of occupational therapy	Not worked overseas	Less than 2 years	2 years or more	Total			
Clinical	66.6	20.5	12.9	100.0			
Non-clinical							
Administration/management	59.9	25.4	14.7	100.0			
Training/education	50.0	27.1	22.9	100.0			
Research	48.4	29.0	22.6	100.0			
Other	47.1	28.6	24.3	100.0			
Total	64.9	21.3	13.8	100.0			

Table A7: Employed occupational therapist respondents: field and time spent overseas working as an occupational therapist, 2002–2003 (per cent)

Source: Occupational Therapy Labour Force Survey, 2002–2003.

Table A8: Employed clinical occupational therapist respondents: hours worked, proportion working50 hours or more and proportion part-time, states and territories, 2002–2003

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Average paid hours worked	32.7	32.4	32.7	31.1	33.4	37.0	31.5	38.2	32.6
Average total hours worked	35.8	36.2	35.6	35.6	34.7	39.4	37.7	43.7	35.8
% working 50 hours or more	8.4	10.1	8.6	10.0	9.8	12.2	6.7	20.7	9.4
% part-time	35.0	40.7	34.1	37.4	40.5	19.5	33.3	17.2	36.4

Note: In the 2002–2003 survey Qld collected data on hours worked using a different format to other jurisdictions. As a result, care should be taken when comparing across jurisdictions.

Source: Occupational Therapy Labour Force Survey, 2002–2003.

Table A9: Persons consulting an occupational therapist in the 2 weeks before the survey: age (years) and sex, 2001 and 2004–05

	Client age (years)			Client sex			
_	0–24	25–64	65+	Males	Females	Total	
2001							
Number	20,100	20,300	*4,500	28,200	16,700	44,900	
Rate per 100,000	303	196	185	293	171	231	
2004–05							
Number	17,200	23,300	*9,500	28,700	21,300	50,000	
Rate per 100,000	254	216	361	286	210	247	

* Estimate has a relative standard error of between 25% and 50% and should therefore be used with caution.

Source: Unpublished data from the ABS National Health Survey 2001 and 2004–05 (see ABS 2002, 2006b); ABS Estimated Resident Population at 30 June 2001 and 31 December 2004 (see ABS 2003).

Appendix B: Explanatory notes

Method

The AIHW is responsible for the collation, analyses and dissemination of data from a number of health labour force surveys conducted in each state and territory (the two annual collections being the nursing and midwifery labour force and the medical labour force). In the absence of centralised national lists for each profession, the surveys largely rely on the various state and territory registration boards to administer survey questionnaires as part of the registration renewal process. For example, the medical labour force survey relies on each state and territory medical board to distribute the survey as part of the annual renewal of practitioner registration (AIHW 2005a).

However, as not all states and territories require occupational therapists to be registered to practise, a different approach was required for the survey of occupational therapists. As a result, the occupational therapy surveys were distributed by state and territory registration boards in some jurisdictions; by OT Australia national office in other jurisdictions; and by the state branches of OT Australia in Victoria and New South Wales (in 2002–2003 only in New South Wales).

The 1998 survey was conducted in late 1998 to early 1999 in five jurisdictions (AIHW 2001). All states and territories participated in the 2002–2003 survey, with the mail-out conducted at various times over the period from January 2002 to December 2003.

Scope and coverage

As outlined above, the administration of the Occupational Therapy Labour Force Survey varied across jurisdictions, and between the 1998 and 2002–2003 surveys, resulting in variations in scope and coverage both across time and jurisdictions.

In 1998 registration boards in Queensland, Western Australia and the Northern Territory surveyed people that they identified as occupational therapists **registered** within their state/territory. OT Australia and some of its state offices surveyed **members** of their organisation in Victoria and the Australian Capital Territory. The other jurisdictions did not participate in the 1998 survey.

The 2002–2003 survey was also administered by the state registration boards in Queensland and the Northern Territory (to occupational therapists registered in the relevant state/territory). Unlike the 1998 survey, however, the 2002–2003 survey in Western Australia was conducted by OT Australia (of its members), not by the registration board. In South Australia the situation was reversed and the registration board in that state conducted the 2002–2003 survey of registered occupational therapists. In 2002–2003, the national office of OT Australia sent surveys to members in Western Australia, Tasmania and the Australian Capital Territory; the New South Wales office of OT Australia distributed the survey to its members in New South Wales; and the Victorian office of OT Australia distributed the survey to its members in Victoria.

Response rate

It is difficult to accurately estimate the response rate to the AIHW Occupational Therapy Labour Force Surveys due to the variability in the scope and timing of the survey. In addition, some occupational therapists may be registered, or members of OT Australia, in more than one state or territory and may have completed a questionnaire in just one state or territory or in more than one. It is not known how often this occurred because it is not possible to match survey records across jurisdictions.

The number of registrations is provided in Table 1, the number of members of OT Australia in Table 2 and the actual number of responses obtained from the survey in Table 3.

It should be noted that while Queensland, Western Australia, South Australia and the Northern Territory have occupational therapy registration boards, not all of these boards administered the survey in 1998 or 2002–2003. Queensland, Western Australia and the Northern Territory boards surveyed registered occupational therapists in the 1998 survey while Queensland, South Australia and the Northern Territory boards conducted the 2002–2003 survey. Care should therefore be taken in comparing the number of responses to the number of registrations in South Australia and Western Australia.

Similarly care should be taken in comparing the number of survey responses to the number of OT members. This comparison is only relevant for those jurisdictions where members of OT Australia were surveyed (see 'Scope and coverage' above).

Representativeness of the data

The figures for both 1998 and 2002–2003 provided in this publication relate to **responses** to the Occupational Therapy Labour Force Survey. As not all occupational therapists were surveyed (as not all could be identified) and not all those surveyed responded, this represents only a proportion of the actual occupational therapy labour force. This differs from the approach taken in the previous publication on the 1998 occupational therapy labour force (AIHW 2001), where estimates of the total occupational therapy labour force in the five participating states and territories were calculated by weighting responses using registration data or estimated registration numbers.

The decision to provide data on responses only in this publication, for both the 1998 and 2002–2003 surveys, was made due to the incomplete knowledge of the actual size and characteristics of the total occupational therapy labour force, and the variability in the survey scope and coverage across jurisdictions. As a result it was not possible to accurately adjust the responses (through weighting) to reflect the total population of occupational therapists (as has been done for medical practitioners and nurses (AIHW 2005a, 2005b)).

There is the potential for some bias in the data as the representativeness of the respondents to the total population of occupational therapists is unknown. Care should be taken in interpreting the data in this publication, therefore, particularly in comparing across jurisdictions and time. In particular it is important to note that New South Wales, South Australia and Tasmania did not participate in the 1998 survey. As a result, the total number of responses in that survey is much lower and the data probably less representative of the total Australian occupational therapy labour force than that collected in the 2002–2003 survey.

Glossary

Employed occupational therapists

For the purposes of this publication, employed occupational therapists are respondents who stated that they were working in occupational therapy, mainly or only in the state or territory in which they were registered or a member of OT Australia, at the time of the survey.

Respondents who reported working mainly or only in another state or territory (147 in total in the 2002–2003 survey) are not included in the state/territory count of 'employed occupational therapists' as they are assumed to be either registered in another state/territory or a member of OT Australia in another state/territory. Occupational therapists on extended leave for more than 3 months (117 in 2002–2003) and respondents who did not give details about their labour force status (12 in 2002–2003) are also excluded for the purposes of this publication.

Field of occupational therapy

A description of the job function of employed occupational therapists. The fields are:

Clinical: an occupational therapist mainly involved in the area of clinical practice; that is, diagnosis, care and treatment, including recommending preventative action to patients. In this publication, an occupational therapist who spends most of his/her work hours engaged in clinical practice is classified as being in the clinical field of occupational therapy.

Non-clinical:

- administration/management: an occupational therapist who spends most hours engaged in administration or management work
- teaching/education: a person teaching or training persons in occupational therapy .
- research: a person primarily engaged in occupational therapy research •
- other: any other job function in occupational therapy, for example, industrial relations.

Geographic classification

While the previous analysis of the 1998 occupational therapy survey used the Rural, Remote and Metropolitan Areas (RRMA) classification of regions (AIHW 2001), the Remoteness Area Structure of the Australian Standard Geographical Classification (ASGC), produced by the Australian Bureau of Statistics, has been used in this publication to present regional data (see AIHW 2004).

The Remoteness Area Structure of the ASGC is based on the Accessibility/Remoteness Index of Australia (ARIA+) where the remoteness index value of a specific location is based on the physical road distance to the nearest town or service in each of five population size classes based on the 2001 Census of Population and Housing. These classes are:

- Major cities of Australia
- Described as 'metropolitan' in this report
- Inner regional Australia

Very remote Australia

- Outer regional Australia Remote Australia

•

- Described as 'non-metropolitan' in this report
- The ASGC accorded to the respondent is based on the postcode of the respondent's main job.

Hours worked

The total number of weekly hours worked is self-reported by occupational therapists and relates to the numbers of hours worked in **all** occupational therapy-related jobs. In the 2002–2003 survey respondents were asked to record their 'hours per week usually worked in occupational therapy job(s)'.

Information on '**paid hours**' and '**unpaid hours**' was collected separately and combined to give '**total hours**'.

Unpaid hours includes after-hours research and administration, voluntary unpaid patient care and unpaid overtime.

The question relating to hours was phrased differently in the Queensland questionnaire from that in other states and territories and therefore care should be taken in interpreting any variation between that jurisdiction and others.

In this publication the Australian Bureau of Statistics definition has been used for the cut-off for full-time and part-time work:

- full-time work: 35 hours or more total hours worked per week
- part-time work: less than 35 hours per week total hours.

Average hours are calculated excluding respondents who have no hours recorded. For example, average paid hours are calculated only for those respondents who have at least one hour of paid work recorded.

Metropolitan and Non-metropolitan

Because of the relatively small numbers of occupational therapists, particularly in the more remote regions of Australia, it has been necessary in this publication to collapse the five ASGC categories (outlined in 'Geographic classification') into the following two:

- Metropolitan area: includes Major cities and Inner regional Australia
- Non-metropolitan area: includes Outer regional, Remote Australia and Very remote Australia.

Occupational therapy labour force

The occupational therapy labour force in this publication includes:

- occupational therapist respondents who stated that they were 'currently working in occupational therapy' (employed as occupational therapists)
- occupational therapists who stated that were 'not employed in occupational therapy but looking for work in occupational therapy'
- occupational therapists who stated that they were 'on maternity or other extended leave for more than 3 months'.

Respondents who reported working mainly or only in another state or territory (147 in total in the 2002–2003 survey) are not included in the state/territory labour force numbers as they are assumed to be either registered in another state/territory or a member of OT Australia in another state/territory. Respondents who did not give details about their labour force status (12 in 2002–2003) are also excluded.

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