Muriel Driver Memorial Lecture

Catherine L. Backman

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Occupational balance: Exploring the relationships among daily occupations and their influence on well-being

Key words
- Occupation
- Concept analysis
- Theory-practice relationship

Although I have considered occupational balance from a scholarly perspective for a decade or so, recent references in popular media to strategies for living a balanced life inspired me to reconsider this concept from a variety of perspectives. The demands of daily life and ways to achieve balance have been the topic of numerous articles in magazines, newspapers, and web sites representing consumer, corporate, and academic interests. Even if many topics in the mass media are selected as marketing mechanisms, there appears to be a trend of increasing interest in issues related to occupational balance in our society. This led me to ponder what occupational therapy could contribute to both the popular and academic discourse.

It is relatively easy to relate to the stories of distress and imbalance by individuals struggling to juggle multiple roles and responsibilities. At times I have been overwhelmed by too many demands, too much to learn, too little time, and a desire to avoid disappointing others. I have never fully experienced a pleasing state of occupational balance, but I think it is a worthwhile goal. We need space and time to think (Fearing, 2001); unfortunately, both may be insufficient during periods of competing deadlines and duties. Preparing this lecture required that I take some time to think, and sharing what I have learned may help others understand the sometimes elusive concept of occupational balance. In this paper I will describe definitions of occupational balance and its evolution as a concept underlying the practice of occupational therapy, work-life balance, findings from studies on balance, and ways to measure aspects of occupational balance.

The concept of occupational balance

Occupational balance is one of the original concepts underlying the practice of occupational therapy, an important tenet since the beginning of the 20th century (Bryden & McColl, 2003; Christiansen, 1996). At that time, physicians spoke of implementing a work-cure, "prescribing a balanced regimen of work" as part of a daily routine of activities "supervised by a new breed of health workers called occupational therapists" (Bryden & McColl, 2003, p. 29). Historical reviews cite Adolph Meyer's 1922 address at a meeting of an organization that would become the American Occupational Therapy Association, wherein he pointed out the need to attend to the rhythms of daily life, most particularly, balanced participation in the four areas of work, play, rest, and sleep (Bryden & McColl, 2003; Christiansen, 1996; Nutin & Michal, 2003). In the 1970s and 1980s, occupational therapists wrote about the balance of work and play to promote wellness (e.g., Spencer, 1989), and changing the balance between the individual and the environment to facilitate adaptation (Llorens, 1984). More recently, occupational therapists refer to a necessary or satisfactory balance across the occupational performance areas of self-care, productivity and leisure as occupational balance. The perception of balance is individualized, influenced by culture, values, and environmental expectations. (See, e.g., Law, Polatajko, Baptiste & Townsend, 1997).

Despite its long history, occupational balance remains an abstract and evolving concept, and is, perhaps, not understood as well as more concrete and observable phenomena in
occupational therapy. While it is often mentioned in occupational therapy literature, it is seldom clearly and succinctly defined. Definitions of occupational balance and related terms, such as occupational imbalance, work-life balance, and balance are listed in Table 1.

Whether or not it is explicitly stated in the definition of occupational balance, most authors refer to a temporal aspect or the influence of time. Therefore, it follows that studies of occupational balance will be enhanced by understanding how people allocate their time and organize their occupations. However, counting hours is overly simplistic (Spencer, 1989) and does not fully capture the concept. A sense of balance is a perceived state, involving attitudes, goals, and perspective, interacting with time and expectations of the socio-cultural environment.

Occupational balance is internally defined. Not even the relatively simple definition of a reasonable allocation of time to self-care, productivity and leisure occupations is uniformly interpreted across individuals. Cooking may be classified as leisure by some, and productivity to others.

Further, cooking may be paid employment and carry a different value than when viewed as a household chore. Shopping, as a leisure occupation, may restore a sense of balance to some people with adequate disposable income, or be time-consuming and tension-creating for someone with a fixed income insufficient for basic needs. These personal colourations of occupations influence perceptions of occupational balance, even when we think we are looking at the same thing.

Detailed explorations of the concept of occupational balance are available in essays by Christiansen (1996) and Yerxa (1998). Christiansen (1996) provides an historical overview of the concept. He then draws on lessons from a broad range of disciplines to discuss balance from three perspectives: time use and activity patterns, chronobiological rhythms, and the relationships among life tasks. Christiansen notes that a satisfactory state of occupational balance appears to be beneficial to health and well-being, however further systematic study is required to provide evidence of this potential causal relationship. Yerxa (1998) reviews several authors'

<table>
<thead>
<tr>
<th>Study</th>
<th>Population</th>
<th>Source</th>
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<tbody>
<tr>
<td>Occupational balance / Balance of occupations</td>
<td>Relative balance across the 3 occupational performance areas of self care, productivity &amp; leisure.</td>
<td>Law et al., 1997, p.38</td>
</tr>
<tr>
<td>Occupational balance</td>
<td>Subsequently defined by individuals in terms of how they choose to spend time on valued, obligatory, &amp; discretionary activities.</td>
<td>Specht et al., 2002, p.436</td>
</tr>
<tr>
<td>Occupational balance</td>
<td>Balance among self care, work/ productive activities, play or leisure, &amp; rest.</td>
<td>Backman, 2001b, p.203</td>
</tr>
<tr>
<td>Occupational balance from the perspective of time use</td>
<td>The way in which people typically organize their days satisfactorily.</td>
<td>Nuri &amp; Michal, 2003, p.228</td>
</tr>
<tr>
<td>Occupational balance from the perspective of time use</td>
<td>Occurs when the perceived impact of occupations on one another is harmonious, cohesive, &amp; under control.</td>
<td>Christiansen, 1996, p.436</td>
</tr>
<tr>
<td>Occupational balance from the social ecological perspective</td>
<td>Extent to which the individual's environment supports functional performance in ADL, self care, independent living, work, play, learning, &amp; leisure.</td>
<td>Christiansen, 1996, p.445-446</td>
</tr>
<tr>
<td>Occupational imbalance</td>
<td>State of equilibrium or stability of opposing forces, harmony in the relationship of component parts; the proportion of which may or may not be equal.</td>
<td>Llorens, 1984, p.30</td>
</tr>
<tr>
<td>Occupational imbalance</td>
<td>Extent of agreement between the individual's goals &amp; abilities, &amp; demands of the environment.</td>
<td>Jönsson et al., 1999, p.355</td>
</tr>
<tr>
<td>Occupational imbalance</td>
<td>An individual or group experience in which health &amp; quality of life are compromised because of being over-occupied or under-occupied.</td>
<td>Yerxa, 1998, p.414</td>
</tr>
<tr>
<td>Occupational imbalance</td>
<td>A temporal concept referring to the allocation of time for particular purposes; may be experienced at both individual and societal levels when people are over- or under-occupied.</td>
<td>Christiansen &amp; Townsend, 2004, p.278</td>
</tr>
<tr>
<td>Occupational imbalance</td>
<td>Excessive time spent in one area, usually work, at the expense of another, usually leisure; may aggravate health &amp; quality of life.</td>
<td>Townsend &amp; Wilcock, 2004, p.253</td>
</tr>
<tr>
<td>Work-life balance</td>
<td>Perceived success in balancing work &amp; family/personal life demands, plus, the amount of conflict experienced when doing so.</td>
<td>Hansen &amp; Jones, 2002, p.746</td>
</tr>
<tr>
<td>Work-life balance</td>
<td>Perceived success in balancing work &amp; family/personal life demands, plus, the amount of conflict experienced when doing so.</td>
<td>Tausig &amp; Fenwick, 2001, p.105</td>
</tr>
</tbody>
</table>
contributions to understanding balance, and proposes that the desired or healthy balance "buffers boredom" (p. 415) and consists of a meaningful variety of occupations that encourage learning. She proposes that "to be healthy, [people] need to be taught to create an individualized balance of meaningful variety and redundancy through discovering, developing and acting on their own interests and by participating in the rules, habits, and rituals of their cultures" (Yerxa, 1998, p. 415).

Lessons from other fields: The concept of work-life balance

Other disciplines have examined concepts very similar to occupational balance. The discourse on work-life balance, or the ability of individuals to manage the demands of both their paid employment and the rest of their lives (predominantly family life) is frequently addressed in sociological, educational, and vocational literature. The typical focus is stress arising from the intensity of the workplace in contemporary society, a global marketplace where there is an expectation of service 24 hours a day, 7 days a week (Perrons, 2003).

"Throughout the 1990s, work-life balance caught the attention of researchers, policy makers, and employers, resulting in the development of a range of employment benefits, legislation, and programs aimed at helping people cope" (Kerka, 2001, p. 1). In some cases, this brought about useful change, such as flexible work hours, or provision of child care at the workplace, which appear to help some people manage the work-life time bind. Similar to the occupational therapy literature on occupational balance, the work-life literature notes that achieving a balance of life roles is an elusive pursuit and defining what it means is highly individualized (Kerka, 2001). Approaches to helping people attain a desirable or satisfactory work-life balance remain incomplete and address a privileged segment of society. Kerka (2001) points out that to the working poor, the idea of balancing work, non-work and other life roles is a luxury. Economic circumstances dictate their priorities and allocation of time.

There is emerging agreement that the dichotomy expressed in the phrase work life balance is inadequate, because it implies there is paid employment on one side of the equation and the remainder of life tasks on the other side of the scale. Most authors acknowledge there are multiple life domains, many of which have not been explored in the work-life balance literature, which in turn, arose from the corporate, policy-making, career-guiding perspective. Warren (2004) noted that over 170 life domains have been identified pertinent to the study of work-life balance, but studies have generally been limited to perceptions of employment and family life.

Two philosophical discussions on work-life balance each resonated with my own beliefs as I considered perspectives on occupational balance and the predicament of imbalance (Amundsen, 2001; Caproni, 1997). Consider the following comment from Caproni, after she spent a period of time practicing work-life balance strategies:

I suspected that trying harder, smarter and faster to balance my life (e.g., learn more time-saving techniques, work harder on my hierarchy of values, make more trade-offs, find a few extra hours in the day) may have been contributing to the problem rather than solving it. Indeed,...I might have been trying to solve the wrong problem. Perhaps the problem – and thus the fix – was not in me but in the conceptualization of work/life balance" (Caproni, 1997, p. 49)

Caproni critiques the assumptions inherent in the work-life balance discourse. She suggests that the framing of imbalance as a problem and balance as desirable and achievable implies there is an alternative lifestyle for most of us and that we are deficient in living up to it. Caproni asks the following questions:

What version of reality is promoted by the discourse on work/life balance? Whose ends are served and not served by this version of reality? Are there alternative discourses that may better serve individuals, communities, organizations and society? (1997, p. 47)

Responding to these questions, Caproni appraises the remedies or strategies proposed to enhance work-life balance. She ponders solutions such as establishing a vision, developing an action plan, listing concrete strategies for addressing one's priorities in life, and other steps leading to personal success and asks: "Is this really the language we want to use to guide our personal lives?" (p. 51). While such language is compatible with a business plan, it may not suit the unfolding of a life story. Caproni further critiques the work-life balance strategists for focusing on an individual or family level, to the exclusion of power issues that occur at a societal level.

In occupation-based literature, Townsend and Wilcock (2004) proposed that occupational imbalance can occur at both individual and societal levels and is one potential consequence of social or occupational injustice. Caproni encourages advancing the work-life balance discussion by creating a "new language that privileges tranquility over achievement, contribution over success, and choice over status" (p. 54). Her ideas have the potential to further the agenda for occupational therapy and occupational science, where both individual and societal needs and goals are considered within the opportunities and restraints of a specific environment.

A second influential essay was based on a keynote address delivered by Amundson (2001) to a conference of educational and vocational counselors. He proposed a metaphor of three-dimensional living to explore the notion of life balance. The first dimension is length, something we have learned to measure by the clock and the calendar, as well as experiencing the slowing down and speeding up of time, depending on what we are doing. The second dimension is
width, which describes engagement in life activities and roles, and may infer a status that defines people’s importance in their communities. It is in the width dimension that being excessively busy may override other dimensions of life. Amundson’s third dimension is depth, which refers to the purpose and meaning of life. The metaphor struck me as a useful way of understanding aspects of balance and explaining them to others. I became fully engaged in the metaphor with Amundson’s whimsical descriptions of problematic configurations of the three dimensions. The following are examples of Amundson’s descriptions.

Skinny living refers to a narrow view and focus on the length dimension, to the exclusion of other areas of life. From an occupational perspective, imagine someone unable or unwilling to take risks and engage in new occupations. Stubby living is a problem affecting the width dimension, and refers to an overabundance of activities, with little regard to the length or depth dimensions. Personally, I recognize when my life is getting stubby, and try to decline projects with little depth. The opposite of stubby living is sideline living, characterized by a lack of activities, perhaps due to unemployment, underemployment, newly acquired disability or retirement. Left unaddressed, sideline living has a negative impact on self-worth and self-efficacy. These two problematic examples of the width of life are compatible with the notion of occupational imbalance, which, as defined by Townsend and Wilcock (2004), refers to being under or over-occupied. False-front living refers to individuals who, from an outsider’s perspective, appear terrific, healthy, and effectively managing life’s activities. However, they lack depth and have difficulty identifying the meaning or purpose of the activities in which they engage, resulting in choices made at a superficial level.

While his metaphor is an amusing way to view aspects of work and life, Amundson’s more important message lies in his discussion of balance as an ongoing process. As motivations or circumstances change, so will the boundaries of the three life dimensions. Re-organization requires self-reflection, identification of perceived imbalances, how they developed, analysis of their impact, and creative solutions with sufficient appeal to motivate people into action. Notwithstanding Caproni’s suggestion that balance may be unachievable, learning and doing along life’s journey is an inherently satisfying experience. We just need to remember that the benefits are found along the way, not at the end of the road. Together, Amundson and Caproni discuss powerful lessons for occupational therapists and occupational scientists.

Findings from studies of occupational balance

Theoretical discussions of a concept are just one part of the learning process. Two questions emerge that may enhance our understanding of occupational balance: What attributes lead to a state of perceived occupational balance? What is the evidence that occupational balance, or pursuing a variety of occupations in a satisfactory way leads to improved health and well-being?

The literature over the past two decades has a sprinkling of studies to suggest that occupational balance leads to improved health or perceived well-being. Spencer (1989) conducted multiple interviews over time with a middle-aged woman who had become quadriplegic at age 19. Over the course of her life, the woman experienced fluctuations in work, play, balance and health. Periods of overabundance in either work or play, to the near exclusion of the other, were consistently followed by observable health problems. An imbalance of occupations also led to psychological or emotional distress, or boredom. After an extended period of almost total play (which appeared to be a combination of leisure and free time) she yearned for something to do that held value and purpose. These periods of imbalance spurred her to take action to restore a sense of balance and good health. An appropriate balance of work and play was recognized by feelings of control over her occupations and her life.

Marino-Schorn (1986) tested the hypothesis that there is a significant relationship between morale and occupational balance, defined as the balance of hours spent in work, leisure and rest. She studied 33 older American adults, mean age 71 years, using a one-week activity log, morale scale, and job deprivation scale. The participants reporting highest morale worked about six hours per day, rested or slept for nine hours, and engaged in leisure for eight hours. Those with low morale worked only half as much, approximately three hours per day, rested for 10 hours, and engaged in leisure for 10 hours. Although this suggests that work is associated with a greater sense of morale, the participants classified the same activities differently – housework was consistently classified as work, but club activities were reported as work by 27% of participants and as leisure by 45%. Thus, it may be the meaning that is attributed to an activity, rather than the classification label, together with the combination of activities in which one engages that is potentially predictive of well-being.

Jönsson and colleagues (1999) conducted a qualitative study of 22 Swedish adults with poliomyelitis sequela (post-polio syndrome) to better understand how they managed daily occupations. In order to feel a sense of achievement, participants stated it was necessary to remain involved in a range of occupations in an appropriate balance. For example, they did not feel good if they were overloaded with occupational demands or withdrawing from social activities. Participants reported altering their occupation choices in order to achieve a (self-defined) good balance, matching their abilities and goals to their occupations. Their symptoms and the environment changed over time, so achieving balance was a dynamic phenomenon, not something that once achieved, remained in place.
Larson (2000) studied the occupations of mothers of a child with a disability using in-depth interviews, participant-observation, and measures of subjective well-being. She reported eight "processes of orchestration of occupation" to ensure success (p. 273), or more colloquially, the descriptions are examples of mothers' multi-tasking. One process was labeled balance. Balancing occupations required mothers to take into account the interests and preferences of family members, set priorities, sequence and synchronize occupations. These ideas reinforce the notion of balance having both a temporal aspect and some aspect of valued or meaningful occupations – if not specifically individualized, at least from the mother's perspective of her family's needs. Larson noted that:

Mothers considered their multiple responsibilities of managing the home to provide healthy meals, a clean environment, and acceptable clothing; of fostering their children's growth and development; of creating a harmonious family environment; of managing the family's financial resources; of adding varied, interesting, and enjoyable occupations to the family routine; and of meeting individual and group family member needs when balancing occupations. (Larson, 2000, p. 275)

Even an accomplished leader in occupational therapy could hardly aim higher or do more than that! When the composition of occupations was well-coordinated it was linked to health and well-being and when there was dissonance among occupations, there tended to be less satisfaction and sense of well-being.

In some of my own work with people who have rheumatoid arthritis (RA), occupational balance was significantly correlated with health status (Backman, 2001a) as well as hours of work (Backman, 2001a; Backman, Kennedy, Chalmers & Singer, 2004). A cross-sectional study explored factors associated with participation in paid and unpaid work of 237 working age adults (18-65 years, 80% female), where paid work was any type of employment and unpaid work was defined as household work, home maintenance, care giving, and volunteer work. Perceived occupational balance was measured using a 1 to 10 scale indicating how satisfied respondents were with their present balance of time spent on work (paid and unpaid), self-care, leisure and rest (1 = not at all, 10 = extremely satisfied). The mean occupational balance score for the entire sample was 6.1 (SD=2.2). However, those who identified their main work as being employed rated occupational balance significantly lower than those who identified their main work as being unpaid work, with means of 5.7 and 6.6, respectively (p = 0.007). Respondents who identified themselves as being limited in their ability to perform paid or unpaid work as a result of their RA (n=72) reported lower occupational balance ratings than did those who did not believe their RA limited work participation (n=167), with mean ratings of 5.6 compared to 6.3. This difference was statistically significant at p=0.02 (Backman, 2001a). Occupational balance ratings were significantly associated with measures of health status and self-efficacy as outlined in Table 2. These findings indicate an association between occupational balance and health and self-efficacy, although the cross-sectional nature of the study does not adequately demonstrate causation.

In an American epidemiological study using data from the 1992 National Study of the Changing Workforce, Tausig and Fenwick (2001) explored aspects of work-life balance in a probability sample of 2958 wage/salaried employees aged 18 to 64 years. They defined their dependent variable, work-life balance, as the sum of perceived success balancing work and family/personal life (on a 5 point Likert scale) and amount of conflict experienced when doing so (also on a 5 point Likert scale). Using regression analyses, they sought to identify predictors of work-life balance. Among their findings were the following three:

1. perceived control of work schedules (whether or not one takes advantage of flexible schedules) increases work-life balance;
2. being a parent leads to greater perceptions of imbalance;
3. controlling for hours of work, women, part-time employees, younger employees, and better educated employees reported significantly greater imbalance than did employees in general.

These findings suggest that imbalance results when obligatory and valued occupations collide. However, since it is hardly possible to change characteristics such as parenthood and gender, or take away an education once earned, only one potential intervention remains: enhancing perceived control of work schedules.

Warren (2004), concerned that work-life balance studies tended to be limited to paid employment and family demands, proposed a broader range of occupations to represent the life side of work-life balance and the potential of work-life balance to predict life satisfaction. Using data from the British Households Panel Survey, she examined information from 3500 employed women between 18 and 59 years of age. Warren tested the hypothesis that part-time employment would result in greater balance and life satisfaction than full-time employment among women. In addition to paid employment and family domains, she examined leisure and financial resources. Of all the variables studied, leisure had the most positive and significant influence on perceived work-life balance and life satisfaction. A higher proportion of part-time employed women were satisfied with their leisure participation than were full-time employees. Overall, however, part-time employment did not predict a satisfactory work-life balance; part-timers were more likely to have fewer financial resources, less financial security, and less responsibility and control at work. She suggested that adequate leisure and financial resources were critical to achieving work-life balance...
TABLE 2
Pearson correlation coefficients for occupational balance and characteristics of health and efficacy. N=237 adults with rheumatoid arthritis.

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Correlation Coefficient</th>
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<tbody>
<tr>
<td>SF-36 Health Survey subscales:</td>
<td></td>
</tr>
<tr>
<td>General health</td>
<td>0.41</td>
</tr>
<tr>
<td>Physical function</td>
<td>0.41</td>
</tr>
<tr>
<td>Role: physical</td>
<td>0.35</td>
</tr>
<tr>
<td>Role: emotional</td>
<td>0.33</td>
</tr>
<tr>
<td>Vitality</td>
<td>0.43</td>
</tr>
<tr>
<td>Bodily pain</td>
<td>0.33</td>
</tr>
<tr>
<td>Social function</td>
<td>0.39</td>
</tr>
<tr>
<td>Arthritis Self-Efficacy subscales:</td>
<td></td>
</tr>
<tr>
<td>Self-efficacy pain</td>
<td>-0.31</td>
</tr>
<tr>
<td>Self-efficacy function</td>
<td>0.35</td>
</tr>
<tr>
<td>Self-efficacy symptoms</td>
<td>0.29</td>
</tr>
</tbody>
</table>

Note: All coefficients are significant at p<0.01. (Backman, 2001a)

Balance and were inter-linking concepts.

Although the preceding summaries present only a sample of work to date, there are sufficient descriptive data to lend credibility to the theoretical ideas about occupational balance, and to propose more rigorous studies be conducted to test the hypothesis that occupational balance makes a significant contribution to health, well-being and life satisfaction. Such studies require valid measures of occupational balance, among other requirements indicative of high calibre research.

Measuring occupational balance

Occupational therapists talk about a balance among occupations, but do we know what a good or appropriate balance looks like? One might argue that because balance is individually defined, it would be difficult to apply uniform measures. Yet it seems reasonable to propose parameters that could be used to evaluate a current state of occupational balance across groups or populations. This should not be very different from measuring other perceptions or subjective states, such as health, well-being, or pain. While occupational balance may not be directly observable, there are likely indicators that make sense and are easily understood to serve as measures (Backman, 2001b).

Because time is easily measured by the clock, there are a number of approaches that rely on counting hours or keeping activity or occupation logs. While time alone does not fully capture the concept of occupational balance, it is nevertheless a place to start. Such approaches include time-use diaries or activity logs (Harvey & Pentland, 2004; Marinoschorn, 1986) and the Occupational Questionnaire (OQ) (Smith, Kiellhofer & Watts, 1986.) Individuals are asked to identify the primary occupation for given periods of time (typically 30-minute blocks) for periods ranging from 24 hours to 7 days. In addition to listing occupations, the log or diary helps demonstrate activity patterns, indicating the proportion of time spent on each occupation, which serves as a basis for identifying issues and interventions related to restoring occupational balance. Additional questions may be incorporated into the diary. For example, the OQ asks respondents to classify the listed occupations, and rate their importance, ability, and enjoyment. This provides further information to assist with client-centered interventions on an individual level. A potential limitation to diaries is that they tend to miss occupations that are embedded within the one cited for each timeslot. People often do more than one activity simultaneously, minding children at the same time they are reading for pleasure, or discussing a business proposal while playing a round of golf.

Moving diary entries to a different level is the Experience Sampling Method (ESM), used in studies of the various attributes of engaging in daily occupations (Gikszentmihalyi & Larson, 1987). While this approach is impractical for clinical practice, the research findings arising from its use are applicable to our understanding of occupational balance (Backman, 2001b). The ESM involves asking participants to complete a summary sheet describing attributes of occupational engagement every time they are signaled to do so (via pager or similar technology). This approach is intended to minimize reliance on memory and reconstruction of occupational experiences by requiring that information be documented as the occupation is taking place.

Personal projects analysis is another approach to describing and evaluating occupations (Little, 1983). One aspect of personal projects analysis especially addresses the issue of conflict among occupations (Christiansen, Little & Backman, 1998; Little, 1983; 2000), which is a potential indicator of occupational imbalance. Personal projects are defined as specific, goal-directed activities. Personal projects analysis involves identifying a number of current projects and rating various attributes, such as the level of challenge, importance or enjoyment the respondent attributes to each project. A cross-impact matrix evaluates the potential compatibility or conflict of pairs of projects. Such an exercise provides a structure for reflecting on a range of occupations and potentially the individual’s sense of occupational balance. In previous research using personal projects analysis, five theoretical factors have emerged which, in part, explain or predict well-being. To the extent that people are engaged in projects that are meaningful, well structured, supported by others, efficacious, and not too stressful, their well-being is enhanced (Christiansen et al., 1998; Little, 2000).

There is a need to examine multiple life domains when measuring balance, a need to move beyond perceived balance across self-care, productivity and leisure (Fearing, 2001) and grapple with the multiple occupations that comprise a person’s day, the characteristics of the occupations and the
individual engaged in them, and how that influences health. Not an easy task, by any means, but one that occupational therapists are equipped to explore.

Summary
In this lecture, I have reviewed theoretical discussions and definitions of occupational balance, findings from selected studies, and highlighted some methods for measuring aspects of occupational balance. Are any of these ideas directly applicable to occupational therapy practice, education, and research? Consider the hassles of everyday life, and add the complicating factors of illness, injury, disability, and limited income. Life, and the pursuit of necessary, desirable, and obligatory occupations, can become overwhelming. Given that occupational therapists aim to enable individuals, regardless of ability, to successfully engage in a range of occupations, the answer to the question is yes. Furthering our understanding of occupational balance can improve our ability to serve individual clients and society.

In 2001, hearing stated in her Mariel Driver Memorial Lecture:

We will not only recognize and value the skill of maintaining balance, our own and that of our clients, but we will live it. Balance will not be viewed as a set of scales that has equal parts such as work on one side and play on the other but rather the kind of balance that comes from being centered so that we act from a stable base. From that stable base, we will gain a keen sensitivity to rhythm – knowing when to move and when to let go. (Hearing, 2001, pp. 214-215)

Perhaps these reflections have added a little coherence to the study of occupational balance. Occupational balance is a relative state, recognizable by a happy or pleasant integration of life activities and demands. There are indicators of imbalance, more so than tangible ways to measure it, and once recognized occupational therapists have the strategies to help restore a sense of occupational balance. Given our collective history and skill in client-centred practice, occupational therapists are capable of both advancing this line of inquiry and attaining occupational balance for ourselves and our clients.

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References
Précis
Équilibre occupationnel : Explorer les liens entre les occupations quotidiennes et leur influence sur le bien-être

Mon intérêt pour l'équilibre occupationnel repose sur le sentiment d'être dépassée. De nos jours, la vie est caractérisée par un trop grand nombre de demandes, une trop grande quantité de choses à apprendre, trop peu de temps pour accomplir toutes ces choses et un désir d'éviter de découvrir les autres en ne respectant pas les délais. On trouve de multiples références au concept de l'équilibre occupationnel dans les médias populaires, passant des émissions de télévision aux magazines, aux journaux et aux salons commerciaux. On constate également que depuis les origines de la profession, au début du XXe siècle, alors que des régimes équilibrés de travail étaient prescrits aux patients en voie de rétablissement, un nombre croissant d'articles de recherche en ergothérapie ont été publiés sur le sujet de l'équilibre occupationnel. Plus récemment, les ergothérapeutes ont davantage utilisé le terme « équilibre occupationnel » pour faire référence à l'atteinte d'un équilibre satisfaisant dans l'ensemble des sphères du rendement occupationnel, c'est-à-dire les soins personnels, la productivité et les loisirs. Cet article présente une discussion et diverses définitions de l'équilibre occupationnel et du concept de l'équilibre travail-vie personnelle qui y est associé, tels qu'ils sont discutés dans la littérature des domaines de la sociologie, de l'éducation et de la réadaptation professionnelle.

Deux articles en particulier sont mis en relief dans le discours concernant l'équilibre travail-vie personnelle, c'est-à-dire les essais de Amundsen (2001) et Caproni (1997). Amundsen se sert d'une métaphore sur la vie tridimensionnelle pour expliquer l'équilibre travail-vie personnelle. Il se sert des concepts de la longueur, de la largeur et de la profondeur pour décrire les aspects des tâches et des occupations de tous les jours. Caproni s'interroge sur savoir si la recherche d'un équilibre satisfaisant représente vraiment un objectif réaliste. Les écrits suggèrent que le concept de l'équilibre occupationnel ou de l'équilibre travail-vie personnelle n'est pas sujet pertinent que pour une strate privilégiée de la société. Pour le travailleur défavorisé, l'idée de l'équilibre entre le travail, le temps passé hors du travail et les autres rôles de la vie est un luxe, en raison des circonstances économiques dictant ses priorités et l'utilisation de son temps (Kerka, 2001).

Les résultats d'études sélectionnées sur l'équilibre occupationnel indiquent qu'un état de déséquilibre est associé à des problèmes de santé et qu'un degré satisfaisant d'équilibre occupationnel a des effets bénéfiques sur la santé. L'article présente un résumé de quelques évaluations sélectionnées de certains aspects de l'équilibre occupationnel. L'équilibre occupationnel est un état relatif, que l'on peut reconnaître par une intégration heureuse ou plaisante des activités et des demandes de la vie quotidienne. Les ergothérapeutes possèdent les connaissances et les compétences pour poursuivre des études sur l'équilibre occupationnel et pour traiter des questions liées à l'équilibre et au déséquilibre occupationnel, tant au plan personnel qu'au plan professionnel.