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Creating Futures: A New Paradigm to Revitalize Rehabilitation

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ABSTRACT Like other helping professions, the field of rehabilitation has sought to restore individuals to the situation they were in prior to seeking help. A more vigorous approach to those who seek help might be to focus on their likely future, and then intervene in such ways that future opportunities for the individual are enhanced. This paradigm shift in intervention strategies could present a new and more positive approach to the field of rehabilitation as well as to other helping professions.

One of the traditional definitions of rehabilitation has been "restoration" of individuals who happen to have disabilities to their previous work and life situation (Wright, 1980: 321-322). The rehabilitation counsellor or coordinator defined their task as returning clients to their previous positions in society, particularly focusing on work (Parker and Hansen, 1981: 63). Many rehabilitation professionals and their facilities or agencies continue to concentrate on this moderate goal. Many professionals have never and do not even now question whether alternative goals or options are possible, or desirable.

Those who work in the field as rehabilitation counselors, as well as many leaders in the broad field of rehabilitation, know that not all is well with this existing approach. Some would say the future of work itself is likely to be limited, others acknowledge the reality of under and unemployment (Lerner, 1997), and still others know of the resistance to hiring by employers who are squeezed by constant global competition. Certainly, clients of the system, that is, people with disabilities, know very well that "the system" does not always work to their benefit. The problem is similar in other helping professions.

Reasons for the failure of the "restoration" rehabilitation approach are many and mixed. While some observers and researchers find faults with and about the "system" or the bureaucracy (United States General Accounting Office, 1993), others address the issues of stress (Shouksmith, 1985; Flett, et. al., 1992, 1993) supposedly induced by complex work tasks, restructuring, managerial incompetence, or plain paper work. Still others decry the difficulty of dealing with the complex needs of clients, limited and unimaginative budgets, and uninterested employers or communities.

Some argue that the field of rehabilitation is becoming richer and more options are now available. Most note the negative effects of bureaucracy and paperwork however. A few professionals even argue that rehabilitation is becoming poorer and fewer choices are available, that bureaucracy has increased and flexibility and professionalism has all but disappeared. Greater attention to employment, less interest in social or psychological issues, and more simple "return to work" or placement in supported employment activities are the results (Vandergoot and Worrall, 1979).

Few have directly identified the goals of rehabilitation, that is, a return to work, as being a limiting factor in itself. Vocational rehabilitation and third party insurance based approaches in particular have focused on returning their clients to the same workplace, without concern that alternative investments might pay off far more for the individual concerned, and eventually to the larger society. Though practical and inexpensive, such modest approaches as a return to previously carried out work in the same, or a similar, workplace, ignores the larger psychological and social issues. Possibilities that contextual and temporal changes have created a need for more sophisticated interventions (Newsome, 1989; Waldrop, 1992), or that greater returns for all parties are possible, especially in a time of rapid social and technological change, are denied. Rather than a long-term win-win strategy, administrators and insurers seek short term and lowest cost possible avenues.

An alternative definition of rehabilitation could lead to a different paradigm which sets a greater challenge, that of encouraging people to achieve all they are capable of becoming, within a global business and entrepreneurial system. This "optimal development" goal for the rehabilitation effort is predicated on assumptions that if disability occurs, then the rehabilitation profession and agencies involved could and should seek more than just a limited return to work. Such an approach might use concepts from "futurology" or systematic forecasting of the future by study of present trends in society (Brown, 1993). Redefinitions of the task, and consequently, paradigmatically different approaches to working with clients may yield far more opportunity than continuing with the same old approach. Education, training, growth, development, and a wider range of intervention activity than just a return to previously performed work should become part of the rehabilitation process. Whether motivated by guilt or idealism, the net effect is to invest financial support, time, training, counseling, and other resources on behalf of and with clients to assure both personal success and a greater and better long term return to society.

SOCIAL RESPONSIBILITY AND ETHICAL APPROPRIATENESS

Born from a post World War I concern for social responsibility to those who defended the country, the field of rehabilitation has always been known for a strong streak of spirituality, morality, and ethical concern (Obermann, 1965). However, the presence or absence of strong leadership at the national level (conservative versus interventionist Presidents, for example), the presence or absence of wars, and economic trends have played a role in the attitude and behaviour associated with the activities and the disciplines associated with rehabilitation (Walker, 1985).

MORAL CHANGE

At the end of the 1990's, a "new ethics" (Duncan and Woods, 1989; Meyer, 1990; Wolfensberger, 1994; Campbell, 1992) began to emerge. This ethics incorporates social responsibility rather than the "pig in the trough" attitudes characteristic of the 1970's and 1980's, that is, an ignoring of and discounting of the homeless, the poverty-stricken, and the people who have severe disabilities. More questions about the procedures and practices of rehabilitation from an ethical point of view are being asked by those influenced by the new moralities, for example, they might raise priorities such as, why aren't more difficult cases being served? Why are cracks in the system permitted to stay? Why are resources so limited? What policies are in place and why? Why are some groups or categories ignored or denied services? Why can't some of the agencies involved work together rather then compete? Why is so much effort spent on paperwork rather than people? And so on.

Although questions from an ethical point of view are being raised, social and political gridlock often prevent constructive action which could conceivably loosen or free up the system of services. The change of leadership from conservative towards more liberal, the highly significant growth of the United States economy, and other forces do not appear to have altered the situation. The interventionist example of John F. Kennedy, with such significant changes as those that brought Mental Health Centers, the Peace Corps, and other innovative programmes, does not seem to have occurred with the Clinton administration. Rehabilitation could benefit and become the richer if (and when) a revitalization movement takes place.

SOCIAL CHANGE

Another route by which rehabilitation may grow is to examine and create social change, particularly that designed to take place over longer time periods than the four-year Presidential race and elections. Get rich quick attitudes, a one or two to four year time span for planning, and a focus on here and now private profits now has led to a negative attitude towards incremental change and long term gains or change. Rather than consider the benefits available from long term public growth and investment, the focus in rehabilitation, like that in business and industry, has been upon individuals (Stubbins, 1982; Stubbins and Albee, 1984). A secondary focus has been upon the here and now - consequently

rehabilitation workers have sought immediate results compatible with supported employment, or return to work efforts for individual clients. Rehabilitation has used computer technology more to control than to free up or train people with disabilities. Opportunities are many, to enable individuals to use technology to enter the worldwide market place, whether for simple and routine data entering, or for creative art, writing, and social participation. Yet the rehabilitation profession have almost utterly failed to look at or address long term social change, that is, to deal with significant matters above and beyond the individual or case level over the long term (Korten, 1990). Exceptions do occur, for example, Jackson (1995) attempted and apparently succeeded in re-engineering the processes within an agency as to how rehabilitation services were delivered.

FUTURES

An even more ambitious approach might focus on futures. Futures are thought of here as design and development of plans that use likely trends, that take into account various possible scenarios for the future, or that study career paths and enable individuals to create suitable paths for themselves. In fact, a wide variety of methodologies have evolved as part of the futures approach - most organizations and individuals can benefit. In part, the ability to reflect on and learn from past experiences is the key to continued personal and organizational growth and renewal (Michael, 1987; Vaill, 1989). Futures grew from a variety of studies, including Bayesian statistics using probability of events occurring, investment strategists who seek profits from various alternative opportunities, risk analysis, insurance forecasters, weather predictors, and so on.

One route to enrich rehabilitation efforts is to examine "futures" (Bestgen, 1992) as a tool or means. Researchers, proponents, and followers have developed what may be regarded as a cult - "future studies" as an "in-thing." Futures studies goes beyond prognostication or guessing what may occur, say to a particular agency or association in the near future (Johnson, 1995). Some futures people follow trends (Naisbett and Aburdene, 1990; Symington, 1994) and may examine statistical and other data to predict. Others note the burgeoning of more choices and the influences of decisions, strategies, and politics, and yet still others engage in constructing scenarios (Maruyama and Harkins, 1978; Textor, 1980). Some are optimistic (Berry, 1974), others pessimistic (Meadows, 1972; Ehrlich and Ehrlich, 1974; Catton, 1980).

Futures scenarios are stories taken from the imagination of diverse individuals - what might happen in the future, or what might the future be like. Various instructions may be given to interviewees, such as "tell about the best possible future you can imagine," then continue with similar instructions to elicit the worst possible future, and the most probable or likely future. Interviews of individuals may be gathered together, collated, and synthesized, they may also be directed to assure coverage of specific arenas, such as energy, economy, environment, politics, and so on (http://joe.uwex.edu/test/joe/1989summer/fut1.html).

Construction of scenarios in future studies is almost like science fiction. For rehabilitation, the advent of new technologies, social change, attention to systems rather than just to individuals, and giving attention to the aspirations of people with disabilities themselves could collectively lead to exciting prospects for creative solutions and a radically redesigned society. Such changes would create a world in which rehabilitation professionals serve as active change agents in technological, medical, psychological, social, vocational and educational fields. By gathering future scenarios from people with disabilities, comparing them with futures scenarios from employers, and perhaps politicians or others within the same community, rehabilitation personnel could gain deep insights into the structure and dynamics of their community, and into the possibilities of social change. The use of scenarios lends weight to efforts to bring about creative change.

A restructuring of roles from service delivery and case management might create a new vision for rehabilitation personnel, one that extends far beyond the traditional work at the individual level. Opportunities to work with attitudes and behaviour with employers, families, neighborhoods, organizations, communities, and other

groups might appear, and might result in significant change in laws and regulations, political arenas, physical and attitudinal barriers and the environment. That is, rehabilitation could include system change (Stubbins, 1982; Stubbins and Albee, 1984; Bronfenbrenner, 1979) as well as individual help.

Saaty and Boone (1990) list types of change: sudden, slow, subtle, cyclical, and selective, indicating that the latter is the "heart of the matter" (p. 36). Humans have within their power the ability to choose (Waddington, 1978). This is precisely where rehabilitation could seek more meaningful social arrangements, as opposed to a simple return to work, as the prime goal and target for clientele. Indeed, such ideas would parallel the conceptual change from rehabilitation as a means of helping clients seek jobs to enabling people to choose and seek a career (Vandergoot, 1982).

Rehabilitation professionals are in danger of accepting a return to a low paying job that turns out to be temporary and of low quality, when they could engage with the challenge of enabling people with disabilities to chart a career into what could be an exciting future. The long term preparations, using education, technology, and social networks, could make rehabilitation an exciting field once again.

CONCLUSION

Creating futures is an option for those engaged in rehabilitation in the 1990's and the new millennium. An expanded conceptual framework, a new definition, a larger role, a freeing up from the grid-locked bureaucratic paper shuffling tasks of traditional rehabilitation, our field can again become an exciting and enthusiastic place to be!

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