PROFESSIONALISM

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WHAT IS PROFESSIONALISM?

Workers trained in rehabilitation and disability studies bring an important dimension to rehabilitation services and to the rehabilitation profession. With fewer than 60 undergraduate rehabilitation programs and fewer than 90 graduate rehabilitation programs in the United States, there are far too few qualified personnel to meet the needs of people with disabilities in public and community rehabilitation programs. Evenson & Holloway[14] found that only 25% of the workers employed by community rehabilitation programs hold baccalaureate degrees. Of this 25%, only 7% held bachelor's degrees in rehabilitation studies. In other words, of every 100 workers providing rehabilitation services in this group, fewer than two had degrees directly in rehabilitation.

The real losers in this shortage of qualified rehabilitation workers are people with disabilities. Programs in rehabilitation studies are typically designed to develop specialized knowledge, skills, and attitudes that prepare students to assume unique roles and responsibilities that allow them to collaborate with people with disabilities to live independent, productive, and self-fulfilling lives. Specialized knowledge includes such areas as rehabilitation philosophy and processes, public and private rehabilitation systems, disability management, etiology, progression and treatment of major disabling conditions, career information, job development and placement, transferable skills, job modification, school-to-work transition, rehabilitation legislation, program evaluation, and many other areas. Specific skills include behavioral change techniques, communication, case management, assessment techniques, report writing, job analyses, job placement, individual program planning, group work, teaching, and a multitude of interpersonal and community organization skills.

Finally, rehabilitation students are challenged to refine and develop attitudes that place a premium on autonomy, respect, equality, empowerment, being non-judgmental, open-mindedness, confidentiality, and a genuine belief in the consumer's ability to accomplish personal, social, and vocational goals. Specialized training of rehabilitation personnel is important because of the level of responsibility that practitioners assume in virtually every employment setting that provides services to people with disabilities. Employers expect that applicants from undergraduate and graduate programs in rehabilitation will come equipped with a foundation of knowledge about an array of topics relevant to work with individuals, families, social systems, and communities. Equally important is the expectation that graduates of credible academic programs will come equipped with the skills necessary for effective intervention and collaboration with these constituencies.

In addition to rehabilitation skills, employers also seek qualities such as honesty, responsibility, trustworthiness, personal appearance, enthusiasm, commitment, a strong work ethic, and personal integrity. In other words,

employers want workers who behave in a "professional" way. This is true n only in rehabilitation settings—96% of employers who participated in a national survey related to professionalism among young workers, stated that this played a role in their decision to hire an individual.[52] They noted that o attitude or demeanor as well as the ability to communicate indicated the lev professionalism.

PROFESSIONALS

For some, status as a "professional" is reserved for those who have earn graduate degrees, Still, rehabilitation workers with bachelors' degrees are expected to have specialized knowledge, maintain high levels of work performance, be able to work autonomously, adhere to ethical standards, pla the interests of their clients as their highest duty, and commit to collaborativ interpersonal relationships. While they may not be officially classified as professionals, employers of these workers expect them to behave and perfor like professionals.

Despite the official definitions of a "professional," rehabilitation worker are increasingly asserting their rights to be perceived as professionals. They not doing this through loud protestations and demands or by staging sit-ins. They are doing it through the way they approach their responsibilities in the world of rehabilitation. On the basis of the qualities that characterize their commitment to rehabilitation work, they demonstrate that "professional" is t only appropriate word to describe them. Rather than arguing about who or what constitutes a "professional," baccalaureate-level workers use their educational preparation as the foundation for developing a level of professionalism for which they earn the respect of both consumers and colleagues.

Rehabilitation and human service educators who have made a conscious effort to incorporate individual professionalism as a central theme within th human service academic program can enhance their students' self-perceptio self confidence and, ultimately, the quality of services delivered to the individuals they serve.[24] Rehabilitation alumni occupy a wide range of jobs within the human service sector. Studies conducted of undergraduate rehabilitation alumni find a broad range of job tiles and activities.[16,22] Regardless of job titles, it was clear that these alumni perform professional tasks with a high level of autonomy. Reinders[43] also found that human serv professionals are "driven by a sincere desire to help others"[p. 570] that at times means advocating for their clients over the goals of the organization.

PROFESSIONS

The root word for both professional and professionalism is profession.

word "profession" comes from the Latin term "profiteri," which means to declare or avow something out loud or publicly. Originally, the avowal was related to entering the religious life. By the 16th century, it had evolved to include declaring the entrance to an occupation that is devoted to saving lives or souls...or the kind of work carried out by priests, doctors, and attorneys. By the 19th century, the term was informally broadened to include any legitimate occupation by which an individual made money. The 20th century saw special application of the term to distinguish athletes and entertainers who were paid for their play, from amateurs who played for fun.

Does one have to be a member of a recognized profession to be a "professional?" If so, there are probably a limited number of professionals. There are a small group of established occupations, such as law, medicine, dentistry, and the clergy, that appear to meet the kinds of standards normally required of professions. Others, like engineering and architecture, meet most of these standards.[3] Some disciplines, such as psychology, counseling, social work, and teaching, strive to reach the status of profession, but are not fully recognized as such despite the arguments of their respective advocates.

The connection between the terms profession and professionalism is more relevant to rehabilitation education than whether the discipline of rehabilitation meets the specific criteria for eligibility as a "profession." The real question is whether rehabilitation workers with bachelor's degrees are considered professionals even if rehabilitation services are not officially deemed a profession. According to Van Zandt,[53] the answer is yes. He claimed that it is possible to be "professional" without necessarily being a member of a recognized profession. Hughes[26] suggested that the "culture and technique, the etiquette and skill of the profession, appear in the individual as personal traits..."[p. 36]

PROFESSIONALISM

The concept of professionalism is described in terms of attitudes, behaviors, or a combination of the two. Weiss[54] believes that professionalism extends beyond knowledge and skills. It reflects people's commitment as professionals and their socialization into the role of a professional. Peterson and Nisenholz[39] do not see professionalism as something that is accomplished but as a process that extends throughout one's lifetime. Pascarella[38] describes professionalism as a quest for excellence. Maister[32] suggests that the opposite of professionalism is not "unprofessional" but "technician." Technicians are specialists in the competencies that they develop through special training. The core of professionalism is attitude rather than a set of competencies. He defines a real professional as a "technician who cares."[p.16] Hoyle[25] used the term professionalism "to describe enhancement of the quality of service."[p.146] According to Boyt,[7] "professionalism consists of the attitudes and behavior one possesses towards one's profession."[p. 322] A concise explanation of

professionalism was provided by a business manager cited by Maister[32] who said: "Professional is not a label you give yourself—it's a description you hc others will apply to you. You do the best you can as a matter of self-respect Having self-respect is the key to earning respect and trust from others."[p. 17]

CHARACTERISTICS OF A PROFESSIONAL

Maister[32] presented professionalism within a context that clearly extend beyond the established professions when he identified characteristics that distinguished a great secretary from a good secretary:

> *They take pride in their work; they are committed to quality; they seek out responsibility; they take initiative; they anticipate what needs to be done; they go beyond their assigned role but know what their limits are; they act in ways that streamline the loads of others; they make a point of learning and understanding the business/company/ agency; they genuinely listen to the people they work for and with; they can represent the people they serve because they have made a point of understanding and thinking like them; while they appreciate themselves, they are not self-absorbed; they are team players; they can be trusted to keep confidences; they are willing to learn, accepting of feedback and open to change; and they are consistently honest, trustworthy, and loyal.*[p. 15]

Hoch[23] believes that it is not so much what people do, but how they do i that determines professionalism. Among the characteristics that go into the practice of professionalism, according to Hoch, are courtesy, trust, ethics an integrity, personal appearance, communication, enthusiasm, positive attitud ability to relate well to others, involvement with professional organizations, program involvement, service as a mentor, fairness, and personal improvement.[pp. 10-11]

Maister's[32] and Hoch's[23] lists of professional qualities are generic and ar therefore, probably relevant to workers in any occupation. Corey[10] identifie the characteristics that describe effective counselors. Corey submits that effective counselors:

- have an identity
- respect and appreciate themselves
- recognize and accept their own power
- are open to change
- are making choices that shape their lives
- feel alive, and their choices are life-oriented
- are authentic, sincere, and honest
- have a sense of humor

- make mistakes and are willing to admit them
- generally live in the present
- appreciate the influence of culture
- have a sincere interest in the welfare of others
- become deeply involved in their work and derive meaning from it
- are able to maintain healthy boundaries.[pp.18-19]

While there is no agreement on exactly how to define professionalism, the commonalities among the Maister,[32] Hoch[23] and Corey[11] lists suggest that there is a general understanding of what constitutes professional behavior. People with an approach to work as described by Maister[32] are likely to be characterized as more than "very good" secretaries. People would likely use the term "professional" to describe them. Coaches and teammates working with an athlete who exhibits the characteristics listed by Hoch[23] may use the term professional to describe that player. Corey[11] acknowledges that his counselor characteristics are really ideals to which the counselor strives. Still, they represent the kinds of qualities that would help a person be successful in any occupation. In short, we know a professional when we see one—and the development of graduates who qualify as professionals is a goal of rehabilitation education.

INDIVIDUAL PROFESSIONALISM

According to Ritzer[44] professionalism consists of two important realms. One is occupational professionalism, which is concerned with whether or not a particular occupation meets the criteria for recognition as a profession. The other is individual professionalism, which has to do with whether or not a particular worker behaves in a professional manner. Formal recognition of rehabilitation services as a profession is not under the exclusive control of rehabilitation service workers. You have considerably more control over whether or not you are recognized as a "professional." You can take personal responsibility for reaching that goal.

Professionalism is something that need not depend on level of education, number or type of credentials, years of experience, or even the occupation one is in. Students graduating from undergraduate and graduate programs in rehabilitation services are as capable of being as professional as the most dedicated doctors, lawyers, or architects. At a minimum, students graduating from rehabilitation service programs can begin their careers as professionals by understanding and subscribing to the meaning and principle of the Latin root word for profession, *profiteri*.... to declare or avow something out loud or publicly. The foundation for their development as rehabilitation professionals will be their pride in and commitment to the kind of work they intend to do.

You might ask if you see yourself as a technician or as a professional among rehabilitation service workers. Similarly, how do you expect to see

yourself after five years in this business? It is important not to underestimat the value of being a technician. A technician is competent in terms of knowledge and skills related to the occupation. Whether you aspire to be a technician or a professional, you must master the knowledge and skill areas well as develop core attitudes that are required as a rehabilitation worker. W distinguishes the professional from the technician is in the "how" rather thar the "what" of rehabilitation practice. Most of this difference can be traced directly to the individual as a person. A technician can be developed throug an educational program. Professionals have to bring the basic ingredients w them into the program. Education will help to accentuate those qualities anc facilitate their further development. The real test is how individuals assume responsibility for perpetual refinement throughout their career.

Use the lists of qualities identified by Maister,[32] Hoch,[23] and Corey[10] as guides for self-reflection. Do not use them as checklists of qualities that car mastered one at a time and, once all are covered, you turn into a "profession Instead, use them as a means of thinking about your personal strengths and weaknesses in these areas. Find ways to solidify the strengths that you are bringing with you into your rehabilitation career. Develop strategies for addressing the weakest areas. Perfection should not be the goal. Professionalism is a journey, not a destination. You will maintain a steady p on this journey through a genuine commitment to doing the best work you c with consumers and continually striving to know, understand, and accept yourself as an individual.

RELEVANCE TO REHABILITATION STUDENTS

You are entering the rehabilitation profession at a most interesting ti The nature of the role of the "helping" professional has experienced a progressive and profound change over the last 25 years. This change has ha particularly important impact on rehabilitation workers because rehabilitatic consumers have assumed such an active leadership role in meeting the right: and needs of people with disabilities. No longer are professionals viewed as "sole experts" who have a responsibility for "helping" or "changing" the consumer. Rehabilitation professionals are expected to work as collaborato with consumers in applying their distinct areas of expertise in getting consumers to where they want to be, but they are not "in charge." They wor *with* the consumer. Effective professionals understand this and encourage tl consumer to assume personal responsibility for change. They avoid getting that person's way with their personal preferences, priorities, and needs.

PROFESSIONAL ETHICS

One important thing that separates a professional worker from a non-

professional worker is the professional's commitment to ethical practice. An established code of ethics is a requisite for any occupation that aspires to become a recognized profession. Similarly, individual professionalism calls for a personal commitment to a standard of practice that is consistent with the most commonly used ethical principles.

The topic of professional ethics is expansive and complex. A simple but accurate way of referring to ethical practice is that it entails the engagement of "right and proper" behavior. While this is accurate, it is not a very specific description. The perennial question with ethical issues is "Just exactly what is 'right and proper' behavior in a particular situation?" Ethical challenges are inherently ambiguous. While various legal requirements, codes of ethics, and standards of practice all provide guidance, ultimately, most decisions as to what is "right and proper" come down to the individual worker. It is for this reason that rehabilitation professionals must know, understand, and accept themselves.

Perhaps the most important point to make in discussing professional ethics is that *you* are the "bottom line." You must use principles of ethics, codes of ethics, and standards of practice to guide you. You will access supervisors, colleagues, and experts to advise you. The decision, ultimately, on what to do when faced with an ethical dilemma is yours. You have earned the right to this responsibility precisely because you are a professional. By virtue of this status, you are entrusted with the right to make the difficult calls, because you are the one with the knowledge and expertise necessary to deal with the case situation that confronts you.

Our purpose is not to cover professional ethics "from A to Z." Ethics is covered in detail elsewhere in this book. However, because ethical behavior is such a critical component of individual professionalism, we want to present you with the five fundamental principles[30] that underlie the ethical conduct within the counseling profession. Each of the principles is derived from fundamental values subscribed to by professionals. The five ethical principles are:

- *Beneficence* is based on the value of *doing something of benefit* to the consumer. This value motivates most of us to pursue a career in rehabilitation in the first place.
- *Nonmaleficence* relates to the value of *avoiding doing harm* to the consumer. It is sometimes referred to as the "first among equals" among the five ethical principles.
- *Autonomy* is based on the values of *independence and individual choice*. It is a principle that not only relates to the ultimate rehabilitation goal but one that guides the entire rehabilitation process.
- *Justice* is based on the value of fairness. It promotes the equal treatment of all consumers regardless of their personal values, beliefs, goals, or personal characteristics.
- *Fidelity* is based on the value of *loyalty* and calls on the professional to remain committed to the consumer, the profession, and the workplace.

The Commission on Rehabilitation Counselor Certification added *Veracity* i its code in 2010. Veracity is based on the value of *honesty*. It requires you be accurate and careful in your plan of action. These ethical principles and t values that underlie them form a foundation for "right and proper" behavior the part of the rehabilitation professional.

Undergraduate education is in the process of being approved for accreditation by the Commission on Higher Education Accreditation. As a of this, an ethical code specific to undergraduate rehabilitation and disabilit studies will be adopted.

PROFESSIONALISM IS ABOUT YOU

By this time, you should be able to recognize that there is an opportunit for professionalism within the career area you have chosen. It should also b apparent that becoming a professional is pretty much up to you. Your effectiveness as a rehabilitation worker depends upon your knowledge abou people, disabilities, employment, communities, multiculturalism, and a vari of related areas. It further depends on the level of your skills in organizatio planning, communication, interpersonal interactions, behavioral change techniques, and case management, among other skills. As vital as your knowledge and skills will be for your success in rehabilitation, they will onl a part of it. What is more, they are the easy part of your work. You already have a number of skills that you can immediately use and develop further. T same is true of your knowledge base. You already know something about working with people, and further development of that knowledge is the purp of your formal and continuing education. Knowledge and skills developme have the additional benefit of being fairly concrete and measurable.

The extent to which you are able to understand and use yourself as an "instrument" in the rehabilitation process will ultimately determine your lev of professionalism. This is a more abstract responsibility than developing knowledge and skills. It is personal and entails dealing with issues and experiences that have been a part of you for a long time. Your own person-hood will be your most important tool. It is challenging because it requires level of effort that makes developing knowledge and skills, or even earning college degree, seem easy. You must not only get "in touch" with who, wha and why you are, but continually stay in touch with yourself. This must be a challenging goal because so many people seem to avoid trying to accomplis This avoidance is not a luxury that a professional who is responsible for working with other people can afford.

SELF-HONESTY

If there is a single most important quality in developing your

professionalism, it is that you are honest with yourself. Rehabilitation professionals must consider "who" we are because our real selves are what provide the cornerstones for our professionalism. In preparing for a rehabilitation career, students are challenged to look at themselves in ways that they may have never before seriously considered. Self-analysis requires an inventory of one's strengths, limitations, needs, fears, values, beliefs, doubts, assumptions, aspirations, and prejudices with complete self-honesty.

Self-honesty may sound easy on the surface, but most of us find it difficult to do. It can be a little risky to take a close and honest look at who we are. Despite our numerous strengths, there are parts of us that we tend to conceal from others. There are even parts that we might want to conceal from ourselves. Still, these qualities, thoughts, values, attitudes, and beliefs are all a very real part of us. If we are not very proud of some of them, we probably want to try to make some changes, but it is impossible to change things that we do not recognize or do not acknowledge. The same point applies to some of our strengths. People in the helping professions are frequently modest. Many even underestimate themselves in the name of modesty. The price we eventually pay is unawareness of whom we are and what we really have to offer.

For example, in our business, we need to practice being nonjudgmental of other people. You can practice being nonjudgmental by considering yourself. We do not have to "like" what we recognize in ourselves, but that does not mean we need to reject or run from our faults. By acknowledging them, we are in a position to understand them and see where they fit. When we understand their purpose and their effect on others, and us, we are in a position to decide whether we want to make some changes. If we decide to make changes, we can proceed with a more complete understanding of what really needs to change. In other words, we retain control over ourselves. When we deny something about ourselves, we are really abdicating control.

WHY YOU?

A good place to start an investigation of yourself and your potential for professionalism is to examine what it is about you that you think is "right" for the important work of rehabilitation services. Regardless of the majors that college students select, they do themselves a great favor by exploring two areas. One relates to the question "What do I hope to get out of a career in this area?" The second question should be "What do I plan to bring to this career area that will allow me to contribute something to it?"

These can be complicated questions, but they are not worth asking unless you are willing to invest some time and energy in honestly answering them. The questions do not have any "right or wrong" answers. In responding to them, consider questions like:

- How did I get interested in this area?
- What is it about me that will make me good at it?

- How am I different from other people so that I am probably more suited to this kind of work than others might be?
- How does this particular career area "fit" my personality?
- What motivations do I have for working with people?
- How is my value system similar to those of people who are already in this field?
- How do I seem different from people who are already in the field?
- What life experiences do I bring with me that influence my beliefs about people with disabilities?

Before considering these questions, commit yourself to self-honesty in answering them. It is equally important that you avoid judging your respons to the questions. Do not stop with just answering the questions. Reflect on your responses. Think of other questions that you might ask to help clarify you chose this career. Ask some of the questions of someone who knows y well. Get their perspective. You can move a long way toward knowing yourself better if you can engage in this kind of introspection. It will also h you decide whether a career in rehabilitation is right for you.

NEEDS

Another avenue of self-exploration is to build on the question of what y hope to get out of a career in this area. The question is "What's in this caree for me?" What do you want? What do you need?

There may be as many reasons for pursuing a rehabilitation career as th are rehabilitation professionals. Needs, values, and beliefs are individual an personal. They can be traced to experiences that we have had, lessons we h learned from significant people in our lives, and our personal interpretation all of these events. A few examples of common needs of human service workers include the need for approval, self-respect, security, to do for other what someone has done for you, recognition, success, to be needed, to retur favor for help received, and many others. All of these are legitimate needs. They have influenced most of us, at one time or another, in our rehabilitatio careers.

It is important to note that there is no such thing as a "good" need or a "bad" need. These are judgmental terms and judgment will only inhibit our willingness and ability to look at what we really need and want out of our careers. The behavior that we engage in to fulfill these needs can be benefi neutral, or even harmful to our consumers. Some workers may be complete unaware that what they are doing within a rehabilitation relationship is reall better designed to meet their own needs than it is to be of real help to the consumer. It is not a matter of being "evil" or of trying to harm the consum Either we do not recognize our more self-centered motivations, or we deny them by covering them up with other motives that are more altruistic. The point is that personal needs and wants of the worker can influence the proce

so it is important that we are aware of the ones we bring with us.

We cannot possibly discuss all of the needs and motivations that rehabilitation workers might have in relation to this kind of work. The following are four common need areas that might be helpful to use as examples as you look more closely at your own needs. One area relates to the need to be wanted, valued, or needed. Feeling needed or valued may be a good example of something that we would like to have but do not "require" in order to be effective rehabilitation workers. If it is something that we simply prefer and comes as a "bonus." It is not likely to have a negative effect on your work. If it is a personal need, it could shift your focus from the consumer to yourself. For example, some consumers are not going to need or value you. Would you treat them differently than you would treat those who are clearly appreciative? How will you react to consumers who not only do not need you but also make it clear that they do not even want you in their lives? Closely related to this is the "need" to be liked. Most of us would not see "being liked" as a need, but many of us have experienced times when we would go to almost any length to avoid being disliked. Wanting to be liked is not a bad thing. On the contrary, the value that we place on being accepted by others is probably accompanied by our ability to be sensitive to, and empathize with, other people. The desire to be valued and liked can prompt behaviors that help us to be effective in our work. We want to be careful when this desire or preference is really a need, because unrecognized needs tend to move to the top of our priority lists.

The needs for respect, prestige, or status are also common among rehabilitation and other human service workers. Consider how important these things are to you. Then think about how much you "have to have" them in order to be okay. The value of placing a priority on respect and prestige is that you are more likely to understand the importance your consumers place on these needs. Many of them will have direct and extensive experience with being unfairly scrutinized and treated with disrespect. Your appreciation of the importance of human respect can have a positive influence on how your consumers perceive you. There will be times when some people will devalue both you and your consumers. You are in a position to help consumers understand that the most important kind of respect is self-respect. Status and prestige determined by external entities can be powerful reinforcers for both rehabilitation professionals and for consumers. If we are depending on (needing) this external validation, we could be disappointed. You can establish your own criteria for success and progress that is based on an honest self-assessment. You can help your consumers do the same thing. That way, external endorsement will be nice but serves only as a bonus that supplements your assessment of your own efforts and accomplishments.

A third area for you to consider involves the need for control, power, and influence. At first glance, you might wonder how someone could imply that you might be looking for ways to obtain power and control in this business. If you stop and think about it, there are few occupations where you have as much

opportunity to influence the lives of other people as you do in human servic You will be in a position to work with people who not only feel vulnerable l who are vulnerable. They may have been taken advantage of and dehumani to a point where they may not even know whether someone new is harming them. Your role is to provide support and expertise to consumers in their ef to gain control and power in their lives and not to serve as a replacement for some other "power broker" in their world.

It is unlikely that you would deliberately abuse consumers with any of t power that comes with your role and position. More likely, you will use opportunities to "influence" your consumers to do what you think is best. Y are using your position to determine what is best for the consumer. Your commitment to your consumer makes you want to ensure that it is done "rig We may think we know what "should" happen, but we must be sure that the consumer wants the same thing. Some consumers may want the worker to decide what is best. Exploring possibilities, considering alternatives, makin plans, and coming up with strategies are areas that require that we collabora with consumers. Then, the consumer decides. While it may be more "convenient" for both the consumer and the worker if the worker makes the decision, the rehabilitation process works best if it is a collaborative decisio Sometimes this means that the consumer will choose something different fr what we recommend or prefer. Ultimately, our job is to ensure that the choi are based on the best and most complete information and resources availabl

The fourth need/want that we address may seem a little surprising. Sometimes people will joke that rehabilitation workers are just in it "for the money." This statement is amusing because large salaries are rarely part of most rehabilitation positions. We mention it because salary is a very comm concern for most people, regardless of their occupations. Rehabilitation workers have as much right as anyone else to a decent standard of living an we should not be embarrassed to identify it as a legitimate want. We are no this business as volunteers. We have expertise of value to people with disabilities and to society in general, and the idea of subpar financial remuneration is demeaning to professionals who are highly skilled, knowledgeable, and able to deliver quality services. Few rehabilitation and other human service workers embark on their careers for monetary reasons, that does not mean that securing a respectable income is not of importance. workers receive inadequate salaries, they are likely to get discouraged, burn out, and eventually leave the profession for something that is more financial rewarding, even if they would prefer to continue in this business. Being underpaid can cause some good workers to resent their work and distract the from focusing on the needs of their consumers. Eventually, they become no different from workers in other occupations whose sole motive for working related to financial needs.

These four needs are simply four legitimate and frequently seen needs. None of them may even apply to you. Meeting these needs can contribute t

the effectiveness of the rehabilitation professional. Examine your own needs and anticipate how they might be met through rehabilitation work. Do not look for clear-cut, easy answers, because our needs are not always conspicuous or simple. The clearer you are about them, the better chance you have of meeting them. More importantly, you will be better positioned to control any unwanted influences they might have on your consumers and on your work as rehabilitation professionals.

VALUES

One of the cornerstones of your approach to working with people within rehabilitation, or any other kind of human service setting, is your personal value system. Because values are personal, they are not very objective. They represent the way that we would like our world to be and the way that we believe things should be if they are going to be "right." Cultural background, family members, religions, education, and our varied experiences all influence our values. Rehabilitation professionals are challenged with the responsibility of examining, clarifying, and understanding their personal value systems, because they play a key role in working with other people.

Our values are an inherent part of us and play a critical role in determining what we believe, what we think, what we learn, how we behave—and how we interact with other people. They pertain to what is "of value" to us as individuals. Think for a minute. What do you consider to be of greatest value to you in your world? It may be your parents, your mate, your children, your home, your job, your education, your freedom, your health.... any of a multitude of possibilities. Who is to say that one of the values that you identify for yourself is not "valuable?" Let us take it to a less dramatic level. What if one of your identified values is your car, your music collection, your flower garden, your horse or cat...or something equally personal to you? Who has a right to suggest that what is valuable to you is not as valuable as something else might be to another person? There really is no room for judgment when it comes to values. Still, many of us have experienced some level of judgment directed at something we value. Rehabilitation professionals must avoid doing that to their consumers and their consumers' value systems.

You should consider several things in relation to personal values.

- What are they?
- Where did they come from?
- Who influenced them?
- How have they changed?
- Are they temporary or permanent values?
- How do they influence us...our thinking, our choices, our behavior?

Make a list of the ten things that you value most in your world. Do it without a lot of thought and write down quickly what comes to mind. After you have made the list, think about how much time/energy you devote to

"attending" to each item on the list. This assessment will tell you a good de about how important these values are to you.

For example, a father says that his children are first on his list of values. Yet, upon honest self-reflection, he acknowledges that he really does not ha much time to spend with them. He spends his time on the job, at school, playing golf, doing home repairs, et cetera. What does he really value? The point is that a good barometer of what we value can be determined by the amount and quality of time we spend on it. What do you spend your time doing? What do you think you will spend your time doing five years from now? What can these time investments tell you about your personal value system?

Considering how you spend your time can also give you insight into wh some of your deeper values might be. For example, the father could say tha works so much in order to provide his children with the financial security th he never had. Thus, security for his children (and possibly for himself) is o of his primary values. That seems reasonable. There is no judgment about value list. His children may eventually challenge him about which has mor value, them or the importance that he places on their security as he defines i Understanding his response to such a challenge can help him be clear about what his motives are, the reason for his motives, and where and how he can channel his energy in the ways that are most important to him.

Take the next few weeks to consider what you value most in your life a in this world. As you go through this process, consider the individuals (par family members, teachers, and friends) that have had an impact on shaping what is valuable to you. Think about how your cultural background and environment have influenced your current value system. Identify special ev or experiences in your life that have affected your value system. Reflect on ways that your values have evolved and changed over the years.

Rehabilitation professionals have a responsibility to support clients in reaching the goals they establish. We have neither the right nor the responsibility to set goals for our clients or to determine what is "right" for them. A client's personal value system, not the professionals, should be the guiding principle in determining their goals. Some workers, directly or indirectly, "persuade" their clients to see things as the worker does and to ad values that are similar to the worker's values. The ones who do it deliberate are usually so overt that they are not tolerated for long. More common are workers who are unable to recognize when they are trying to change others "fit" the way they think things should be. They are subtle and consequently more difficult to detect. They have trouble understanding why their consum are resistant. They do not recognize that they may be doing more harm than good to their consumers.

Our job is to help clients clarify their own value systems. Our challeng to help clients identify those parts of their value systems that prevent them f getting where they want to be. We do not substitute our values for values th

are truly a part of the client's own system. Understandably, you cannot be expected to leave your values at home or to be completely "value neutral" in your work with people. Your values are a part of you, and denying or ignoring the fact that you have certain values is impossible. For that reason, it is important that you be aware of and understand your values so that you are in a position to ensure that you do not impose them on your clients.

Because you have your own values, you will inevitably encounter value conflicts in your work. You will be confronted with conflicts that your clients have with themselves, with others, and with you. In addition, you can expect to experience value conflicts of your own when dealing with the diverse clients that you will have in your work. You cannot expect to be effective in assisting your clients or in managing your own conflicts unless you are grounded within your personal value system.

Consider this scenario. You are working with a young client with a disability who is capable and qualified for a number of jobs, but she is unwilling to put forth the effort to seek and obtain employment. She has the potential to be successful in college, but clearly states that she has no interest in going back to school. She tells you that she believes it is "the government's responsibility" to take care of her because she has a disability. Your strong work ethic and value for education puts you in direct conflict with her position. What kinds of thoughts, emotions, and actions do you think would be a part of your response to her?

Another example might be your work with a married mother with a disability who is seeking rehabilitation services so she can find a job and move out on her own. She has three children ranging in ages from five to 15 and feels as though her life is slipping away from her. She dropped out of school when she was seventeen and pregnant. She is married, never worked, and is very bored with her life. She wants a job so she can escape from her family and live on her own. She said she loves her children but cannot take living with them or with her husband anymore. What kinds of thoughts, emotions, and actions do you think will be a part of your response to her?

Other examples of client value issues that commonly confront rehabilitation and other human service workers include abortion, religious differences, racial prejudice, divorce, pre-marital or extramarital affairs, the use of illegal drugs, and gay or lesbian lifestyles. Because these behaviors tend to be perceived as moral issues, many people are inclined to believe that there is a "right" and a "wrong" approach to them. The rehabilitation professional must be careful about drawing such conclusions and attempting to steer the client to a certain way of thinking. The ethical, albeit more challenging, responsibility is helping clients determine what is "right" and best for them.

BELIEFS AND ASSUMPTIONS

Closely related to our value system are the assumptions and beliefs that we have developed. Beliefs are just what the term implies. They are what we

believe to be true about certain issues and they frequently evolve into assumptions about people. Beliefs significantly influence the thinking, behavior, and emotions that we apply in our interactions with our clients. L values, we develop beliefs through our experiences in life and from what w have been told by people we trust. We treat beliefs as if they were facts rat than products of our personal perceptions and unique experiences. We incorporate them into our way of life and frequently never reconsider them.

Your beliefs are important as they pertain to human behavior and behav change. Human service professionals hold different beliefs on these topics. fact, these differences are the reason that we have such a variety of counseli theories. Some believe that the most effective way of helping people reach their goals is by focusing on behavior change. Others are convinced that re change will not take place unless primary emphasis is placed on having clie develop insight into their feelings and emotions. Still others believe that th focus should be on helping clients modify their thinking and self-talk, and t will result in behavior and emotional changes. You may have beliefs that coincide with one of these general lines of thought. If not, you will develop formulate your own counseling theory or philosophy.

It is important that you consider the beliefs about human nature that yo have brought with you as you prepare for a career in rehabilitation. In an ef to prime the pump for this process, consider the following questions and th extent to which your own beliefs coincide with these statements using this simple 1-5 scale: 5 = Strongly believe 4 = Believe 3 = Somewhat believe 2 = Disbelieve 1 = Completely disbelieve.

Be completely honest in your ratings. You do not have to share them w anyone else, so you do not have to worry about others' judgment. Just remember not to judge yourself either. You are simply trying to get some insight into beliefs that may affect your approach to rehabilitation work.

To what extent do you believe:

- people are basically good?
- people are inclined to growth and personal development?
- people are basically in control of their lives?
- people are basically happy?
- people genuinely want to find a meaning and purpose in life?
- peoples' lives are pretty much determined by their genes and environment?
- people cannot really understand themselves unless they understand their past?
- people are basically capable of understanding and acting on their problems?
- the most important thing a helper can give to a client is good advice?
- most of the problems that people have are connected to ineffective relationships?

- most of the problems that people have are connected to money?
- most of the problems that people have are related to what happened to them in childhood?
- what is more important than reality is the client's perception of reality?
- the most important roles of the helper are to serve as instructor, advisor, and problem solver for the client?
- i is more difficult for older people to change than for younger people to change.
- the best counselor for a person with a disability is someone who also has a disability.
- adolescents are generally resistant to change.
- people with mental retardation are usually happier than other people.
- people will make real change only if they are pushed into it.
- women make more motivated clients than men.
- people learn best by learning from their mistakes.
- effort does not count for anything unless the goal is achieved.
- some people do not want to change.
- people will only work with a counselor that they trust.
- rewards are more effective than punishment in getting people to change.

We already know something about the beliefs of professional helpers. Corey[11] suggests that truly effective helpers have a positive view of people and of life in general. The most effective workers believe in what they are doing because their work is grounded in their basic value and belief systems. They are confident and secure enough in themselves to be able to get into the worlds of others with genuine care and compassion. They respect others as people without necessarily condoning all of their behavior. They are open to change and personal growth, including a willingness to reassess their personal thinking, values, and beliefs.

BELIEFS RELATED TO PEOPLE WITH DISABILITIES

There is one specific area where beliefs are of particular importance to rehabilitation professionals. It is essential that people who embark on careers in this area carefully consider their beliefs, assumptions, and possible biases in relation to individuals with disabilities. All of us enter this career with noble intentions. We want to act on our belief that all people should have equal opportunities to realize their goals. We want to do something to equalize those opportunities. Some of us have direct experience with our own disabilities or with family members who have a disability. Others have not had these experiences. Yet, they believe they have something to contribute to this field. Regardless of our backgrounds, it is essential that we honestly and carefully

assess what we believe and what we assume about people with disabilities.

It is no secret that the biggest handicaps faced by most people with disabilities are the attitudes of society. Our good intentions negate neither those experiences nor the effects that societal attitudes have had on our own thinking, beliefs, and perceptions. Therefore, before we get too deeply into rehabilitation career, we have a responsibility to check out some of our beli about people with disabilities. We may have some hidden beliefs, but they surely "seep" through unless we become aware of them.

Begin by taking about five minutes to brainstorm all of the adjectives th pop into your mind when you think about people with disabilities. Write th adjectives down. After you have finished, look at the words on your list an examine the values and attitudes that might be associated with these adjecti Identify the words that you think may be a product of stereotypes about peo with disabilities. Identify the words that most accurately depict what you th and how you feel about people with disabilities. Follow two rules to ensure that you will get something useful out of this little exercise. First, be honest with yourself; second, do not judge yourself.

Now, let us consider blindness as one example of a disability. Rememb these questions are also applicable to people with any kind of disability (deafness, mental retardation, spinal cord injury, cerebral palsy, stroke, hea injury, mental illness, et cetera).

- Do I *really* believe that people who are blind can obtain and hold a job?
- What do I believe would be the most difficult obstacle for a person who is blind in getting a job?
- What do I think would probably interfere with a person who is blind getting a job that would not be an issue for a sighted person?
- What limitations do I believe people who are blind face in their social life?
- What kinds of problems do I believe a young person who is blind might experience in terms of dating?
- What kinds of problems do I believe a mother who is blind might have in raising her children?
- What kinds of problems do I believe that a worker who is blind would have working as a rehabilitation professional?
- Consider someone that you know who is blind, and then think of someone who is sighted but otherwise similar to the first person (age, gender, educational level, et cetera). What are some ways that I have responded differently to the person who is blind versus the other person? What different thoughts, feelings, and behaviors (even the most subtle) might there have been?

Consider other questions as you investigate your beliefs about people w disabilities and think about them as you examine the beliefs you bring to yo career. It is important that you apply these kinds of questions to people wit

other kinds of disabilities including developmental disabilities, mental illnesses, substance abuse, HIV-AIDS, and others. Many rehabilitation professionals with disabilities have been affected by prejudice and adverse attitudes. Nevertheless, they may display similar attitudes toward people with disabilities that are different from their own. No one is immune to mistaken beliefs, but we cannot eliminate the ones we have unless we make an effort to become aware of what they are.

The purpose of these questions is not to get you to catch yourself or to find beliefs that are "wrong." Rehabilitation professionals have a higher responsibility to examine our beliefs, challenge some of them, and reestablish the validity of others. We are all products of experiences, observations, and lessons from our past. What might have seemed reasonable or unreasonable to you at an earlier time might change if subjected to scrutiny as you prepare yourself for a career in rehabilitation. The fact is that no one is perfect. We bring baggage with us into our careers just as we bring valuable strengths.

WHAT CAN YOU DO?

You will have many challenges as you embark upon your career in rehabilitation. One of the most important is that you rise to a level of individual professionalism that allows you to maximize the contributions that you are capable of making in your work with individuals with disabilities. Much of the work you have to do in developing your professionalism might be referred to as "inner work." You need to get to know yourself better by carefully examining your needs and motives for wanting to do this kind of work. You need to identify and clarify your personal values, beliefs, and assumptions as they relate to other human beings. Of particular importance is the need to understand and examine your attitudes and beliefs about people with disabilities. All of this will take time and should accompany your efforts in acquiring the knowledge and skills that are required to be an effective rehabilitation worker.

We have identified three general responsibility areas that are of particular importance to serious professionals. They include work habits, interpersonal habits, and professional development. As you review these areas, consider how you "fit" in terms of these three areas. You already have evidence on how you assume responsibilities by the way that you have approached your education and how you have handled yourself on various jobs, even if they were not in the field of rehabilitation.

We have already mentioned ethics, which is one of the most important realms of responsibility for a professional person. Ethics involves integrity and honesty. Without discussing it with anyone else, assess your own integrity as a student. To what extent have you done your own work? To what extent have you "cut corners" in terms of assignments and meeting course requirements? How frequently do you cut class because you can get away with it? Have you ever cheated on an assignment or an exam? These questions are not designed

to embarrass you. They are private and their purpose is to provide example some of the ways that you can assess how well you carry out professional responsibilities.

It is very easy to look at a list of ethical qualities and say, "Yes, I can m those," but things may change when it is time for action, and past behavior i the best predictor of future behavior. You have the power to change certain behaviors if they do not measure up to the standards that you want to set for yourself as a professional.

WORK HABITS

The first area of responsibility relates to "work habits." Professionals w both harder and smarter than workers who are simply doing their jobs. The are singled out and advance in their careers. This is because of the kind of work habits that they bring to and maintain on the job. One of the advantag of effective work habits is that they can be acquired and are not dependent o unique opportunities, inherent talents, intelligence level, physical strength, c external factors. They are under your control. Punctuality, communication skills, appearance, and initiative are four areas in which you can demonstrat work habits that support your level of professionalism.

PUNCTUALITY

Punctuality may seem like a message from your parents, or teacher, or spouse, but think about how frequently it is violated by people. Few things people value as much as their time. For most people, even money seems to take second place to time. Consideration of other peoples' time is a matter c courtesy. Being on time for work conveys the priority that you place on the and the organization. With a little more organization and planning, you can acquire a reputation for being on time for appointments and meetings—a ha that gets favorable attention. Make a similar commitment to be sensitive to responding to telephone calls, electronic mail, and regular mail in a timely manner. The same principle applies to maintaining records, submitting repc and meeting deadlines promptly and consistently. Be prepared for appointments, meetings, reports, and other responsibilities. The extent to w you have prepared yourself—even if others are not as conscientious—will reinforce your image as someone who places a priority on others' time and needs. People, from the boss, to the colleague, to the consumer, to the unknown inquirer, interpret it as an interest in them as individuals. That is precisely the message that a rehabilitation professional should convey.

COMMUNICATION

Another area on which you can build while you pursue your education i written and verbal communication. Rehabilitation workers are frequently m skilled in verbal communication than in written communication. Many of u

are drawn to the human services field because others have recognized our effectiveness as listeners and communicators. Verbal interaction is usually one of our strengths. Written communication skills are frequently more challenging because most of us do not have as much "practice" with them. Regardless of your perceived strengths in terms of communication skills, there is always room to expand.

Reflect on the qualities that you personally consider a good communicator to have. Identify people (friends, relatives, work colleagues, teachers) that you consider to have exceptionally effective communication skills. What is it that they do that makes them so effective? What do they avoid doing that cause other people to be less effective in their communication skills? Find a model that you can quietly emulate in terms of verbal communication. Almost certainly, one of the strengths of that model will be the ability, and the willingness, to listen with understanding in any situation.

It is important to improve your writing skills. You will probably be responsible for extensive paperwork no matter what rehabilitation position you take. You will be expected to write clearly, concisely, and thoroughly. Two things are necessary for effective development of these skills. One is practice. Use every written assignment as an opportunity to practice your writing skills. Ask for feedback on your writing and for suggestions on ways you can improve it. Ask colleagues to review your work and give you suggestions on ways that it might be improved. Writing is a very personal activity and another person will always be more objective than you are when looking for ways to improve what you have written.

As previously mentioned, "the ability to communicate factored as the top method of evaluating professionalism."[52, A18] The study, conducted by the Polk-Lepson Research Group, included a relatively new area, internet etiquette, as one that many young workers are lacking. They mentioned things such as "texting, survey the internet, or responding to calls at inappropriate times"[A18] as problems in the workplace. This has the potential to be even more problematic in the rehabilitation field where good attending and listening skills are especially important.

APPEARANCE

While it may vary depending on the work setting, professionals have a certain amount of freedom about how they look and the appearance of their offices or work areas. The challenge is to balance that freedom with responsibility and good judgment. It is important that you pay attention to your appearance. One's appearance influences other people's perceptions and people draw conclusions based on our appearance. We have control over how we look, and we can use it to communicate our strengths. We can quietly reveal our good judgment, respect for others, awareness of propriety, and confidence in ourselves through the way that we present ourselves to others. Our personal grooming, hygiene, posture, body language, and dress can all be combined to

demonstrate a level of professionalism that can gain the respect of other peo Do not confuse expensive clothing with a professional look. While expensi clothes may be of some help in making us look good, they can also run the r of sending a message of poor judgment. It is as inappropriate to wear extravagant clothing to a homeless shelter, as it is to wear old jeans to an awards banquet. It boils down to personal judgment. When you are not sur about what is right, you are wise to check it out with colleagues or a supervi

Appearance also pertains to how you present your work area to consum colleagues, and others. Control over your immediate work environment is a privilege that comes with the status of your position. You want to balance t privilege with judgment and a level of responsibility that is consistent with y position. The setting in which you work tells a lot about you. It conveys something about your interests, your values, your work habits, and your consideration of others. You may not be able to control some things such as office size, quality of the furniture, carpeting, et cetera. What is important i how you take advantage of what is under your control. In some ways, your work area is an extension of your personality, and you have a right to set it u in a way that is pleasing to you. At the same time, your work involves othe people and you will want to make a point of ensuring that your area is comfortable for consumers and colleagues. Distractions interfere with communication, and it is easy for an office or work area to have distractions messy and disorganized office is usually distracting for anyone who is interested in getting something done.

INITIATIVE

One of the things employers value most in an employee is the ability to things that need to be done and then to act on that perception. Employees w initiative do not have to be "told" what to do; they anticipate what needs to l done and then they do something about it. Initiative is frequently a strong indicator of both professionalism and potential. Employers have plenty of workers who know how to do their jobs but never go beyond them. It does occur to these employees to think outside the routine of their job even when they have some down time. These workers will do the work, but they need be told to do it. In contrast, the person who takes initiative looks for opportunities to improve things. People with initiative are willing to go out their way to contribute. Their motive is not to get special recognition or advancement—they simply take an approach to work that reflects their seriousness about it and their enjoyment of the challenge.

INTERPERSONAL SKILLS

A second area of development that can coincide with your educational preparation pertains to interpersonal skills. These skills are not "automatic" because one has an interest in working with people. Like all skills, they mu

be developed and refined. Even if you work well with consumers, professional interactions are not limited to your work with consumers. You will also be engaged with colleagues, supervisors, administrators, parents, families, employers, and public officials, to name just a few. You need to be effective in all of all of these interactions.

Application of Rogers[45] three core conditions for an effective helping relationship can take you a long way in any kind of relationship that you have as part of your job. First, you must be real. Take advantage of the work you have been doing to understand yourself as a person by becoming more authentic. People not only appreciate genuineness, they trust it. The pretentious person is easy to spot in our profession.

Second, make an effort to respect everyone. You do not have to like them, approve of their behavior, or agree with their thinking. Respect them simply because they are human beings. You try to do that with your consumers, but it can be applied in all types of relationships. You have to allow yourself to separate behavior and ideas from the person. It is not always easy, but a genuine respect for another person will break down communication barriers that others encounter simply because they do not allow themselves to see the basic worth that exists in everyone.

Finally, try to see things from the perspective of the other person. You do not have to agree with that person or change your own perspective. You will simply have a greater command of the issue or situation if you can empathize with others and open yourself to their views. The greater your understanding of the matter, the better your chances of getting your objectives met. Rogers believed these three core conditions were essential within a helping relationship, and we believe that incorporating them into any relationship, personal or professional, will result in a stronger and more productive relationship.[45]

You will probably be working with people with a variety of disabilities. The cardinal rule in your interactions with them is to relate to them in the same way that you would with anyone else. You will know enough about different disabilities to know what you should do (e.g., offer your arm rather than taking the arm of a person who is blind, position yourself to maintain eye contact with someone in a wheelchair, talk directly to a person with an intellectual disability rather than through another person). You will also know what to avoid (e.g., finishing sentences for someone with verbal aphasia, amplifying your voice for a person who is blind, covering your mouth when speaking around someone who lip-reads). Rehabilitation professionals have a responsibility to understand and practice basic etiquette around people with different disabilities. Other people will rely on you for cues on the proper way to behave. The most important lesson you can provide to them is that someone with a disability deserves and expects to be treated in the same way and with the same level of respect that you would provide to anyone else. The best way to deliver that message is to practice it.

In addition to the points that have been made about effective relationshi there are some suggestions that will distinguish you from those who take a l professional approach to their interactions with colleagues and supervisors. Remember that rehabilitation work is not "solo work" and that you will usu be a part of a staff or team. Collaboration is a critical responsibility, so put your ego aside because you are not competing with other team members. B the one who always places the interests of the consumer as the team's top priority. Be willing to ask questions of others and be open to their feedback At the same time, be willing to provide feedback to them, but do it with genuineness and respect if it is to have any constructive impact. Carry your share of the load and follow through on your assignments. Respect confidentiality, but always share information that other professionals need t their jobs effectively. Make a point of learning agency policies and procedu They sometimes make for boring reading, but you cannot follow them unles you know what they are. Understanding policies and procedures may not o streamline your work effort, but they can save you from potentially harmful mistakes. Avoid gossiping, bad-mouthing, or criticizing your agency or coworkers. It is very easy to fall into this habit regardless of your work setti but negativity is destructive. Others may engage in it, but you can challeng yourself to stay away from it. It is not only inherently disrespectful of peop it is beneath the standards of professionalism.

REHABILITATION PHILOSOPHY

One of the definitions of the term "philosophy" is that it represents "the most general beliefs, concepts, and attitudes of an individual or group."[36] Rehabilitation professionals develop personal philosophies of rehabilitation through their work and personal experiences, but these personal philosophie are significantly influenced by the values, beliefs, attitudes, and priorities of field as a whole. One of the attractions of rehabilitation as a career field is t it is dynamic in its reflection of the values and beliefs of society toward peo with disabilities. Changes that have substantial effects on rehabilitation workers and the people they serve are happening constantly. As a professio you have a responsibility to be aware of how your own philosophy of rehabilitation is evolving. Among the most critical current issues to the disability and rehabilitation communities are choice, language, integration, advocacy, and employment. Remember that it is not the issues but the valu that underlie them that are relevant to the development of your personal rehabilitation philosophy.

Relinquishing "control" has been a difficult process for some rehabilitat workers. Many human service workers outside of rehabilitation continue to struggle with the idea of exchanging control for collaboration. They want t "help" people—but they want it to be on their terms. New professionals wil instrumental in transforming rehabilitation philosophy to one of

"collaboration." Consumers cannot empower themselves unless they can make choices. They cannot make choices unless they have access to information about those choices. Rehabilitation professionals will ensure that their consumers are informed and in a position to make their own best decisions. They will then support consumers in following through on those decisions.

The language that rehabilitation personnel use reflects change. People with disabilities are no longer referred to as "handicapped." A handicap is viewed as a barrier that society imposes on people with disabilities, such as stairs or inaccessible buildings. Another change is the use of "people first" language. To reinforce the fact that the individual is more relevant than the disability, it is considered preferable to refer to a "person with a disability" or "individuals/persons with disabilities" rather than to "disabled person/people." Similarly, rather than "wheelchair bound" we talk about a person who is a wheelchair user and rather than a "CP" or "MR" we talk about a person who has cerebral palsy or a person with mental retardation. Individuals with disabilities generally endorse people first language, but there are exceptions to its general rule. For example, some people who are deaf or blind prefer to use these terms first ("deaf person" or "blind person") rather than "people who are deaf" or "people who are blind." It is important that you take note of how people with disabilities refer to themselves and then model your language after them. If in doubt, use people first language.

Integration is another fundamental philosophical concept within the field of rehabilitation. The deinstitutionalization of people with mental illness began in the 60's and soon began to focus on programs serving people with developmental disabilities. The movement was based on the conviction that people would be better served within their own communities in smaller, homelike settings, rather than in large institutions. While this trend has continued over the past 40 years, it has not included everyone. The fight against segregation of people with disabilities won a major battle in 1999 when the U.S. Supreme Court handed down what is known as the Olmstead[40] decision. This decision essentially ruled that people with disabilities had a right to live in the least restrictive environment possible.

Olmstead[40] was a court decision in which two women living in a state hospital sued the state for the right to live in the community. The physician treating the women agreed that they would be better served in the community, but the state kept them institutionalized because it was more "cost effective." The Supreme Court ruled in favor of the women. The Olmstead[40] decision is expected to have a major impact on the delivery of vocational rehabilitation services, because it is applicable to all settings in which an individual receives rehabilitation services.

While not the exclusive domain of rehabilitation workers, advocacy is one more major responsibility of professionals in this field. With societal attitudes and behaviors constituting the most restrictive barriers to freedom for people with a disability, rehabilitation personnel must constantly work with consumers

to advocate change of these practices. Together, they must educate the publ about the rights of people with disabilities as well as the contributions that tl make to society. One example of disability advocacy is compelling busines to make their buildings accessible to people with disabilities. In an effort to level the employment playing field for individuals with disabilities, educatir employers about non-discriminatory hiring practices is a primary advocacy focus for rehabilitation professionals. Using people first language and polit correcting others who use derogatory language are other ways of advocating people with disabilities. Contacting the media when they stereotype people with disabilities lends support to the rights of people with disabilities.

A major arena for advocacy of people with disabilities is in legislation a public policy. The whole field of rehabilitation has been shaped, in large pa by legislation at the federal level. Rehabilitation professionals have a responsibility to be alert to the constant evolution of issues affecting disabili and rehabilitation. This can be fascinating because changes can sometimes profound. For example, the Workforce Investment Act (WIA), the Ticket tc Work and Work Incentives Improvement Act (TWWIIA),[51] and the Rehabilitation Services Administration's (RSA) Regulations have all been implemented within the last decade. Each of these initiatives has had major implications for employment opportunities of individuals with disabilities.

Policy, and the legislation that institutes it, will happen with or without As a rehabilitation professional, you will have opportunities to influence legislation at both the state and federal levels through advocacy activities. Y will have an obligation to stay informed, not only of rehabilitation-related legislation, but also on a wide range of legislative issues that have direct and indirect effects on your consumers. Far from boring or mundane, being in command of public policy and pending legislation can be among the most powerful tools that you have as a practicing professional.

Unemployment among people with disabilities is approximately 70% an a central issue for many rehabilitation programs. In addition to being a mea of self-support and independence, employment in this country plays a key rc in one's self-concept. Employment is one area in which people with disabili have clearly been left behind.

The U.S. Department of Education's Rehabilitation Services Administration, the federal agency that oversees the implementation of the Rehabilitation Act, recently developed regulations to change the definition c "employment." In the past, extended or sheltered employment was consider acceptable vocational outcomes. The public vocational rehabilitation (VR) program's top priority is promoting access to competitive employment for people with severe disabilities. With this priority in mind, extended employment and sheltered employment are no longer considered viable vocational goals. This means that people who received services from a state VR system must receive services leading to jobs in the community that inclu people without disabilities. Make-work programs and jobs that pay sub-

minimum wages may be personal options for some people with disabilities, but they are no longer supported by VR. The public program believes that people with severe disabilities have the ability to be competitively employed, if they are given the opportunity. It is to this end that the state VR agencies are investing their resources.

PROFESSIONAL DEVELOPMENT

The third area for which you can begin laying a foundation for the remainder of your rehabilitation career is to take care of yourself professionally and personally. Like most career areas in the 21st century, rehabilitation is constantly changing and the changes happen fast. Graduation is only the beginning. Your rehabilitation education will never really end. As a professional, you simply take over primary responsibility for it. Evans[13] defined professional development as "a process whereby people's professionality and/or professionalism may be considered to be enhanced."[p. 35] Evans states our role is to advocate for policy and practices that improve service provision. This includes advocating for legislation and policy that will support the independence and inclusion of people with disabilities in their communities. Recently, there has been much discussion about the use of evidence-based practice in rehabilitation. At a minimum, we owe it to our consumers to keep abreast of the literature and new developments in the field. Gray & McDonald[19] discuss the need to consider all aspects of an issue, including potential consequences, so that we can make better decisions. McLaughlin, et al.[35] advocate for using evidence-based research in our practice as well as using one's own experience and self-reflection. At any rate, practitioners demonstrate their professionalism and, thereby, their commitment to their consumers by staying abreast of current research.

CREDENTIALS

One way of ensuring that you keep up to date with your profession is to attain credentials related to it. You are in the process of earning one essential credential by completing your degree program. A degree in rehabilitation, or a closely related field, will qualify you for higher-level positions that are more challenging and better paying than those are that do not require a degree. Your degree may also qualify you for certification or licensure in specialty areas related to rehabilitation and human services.

While many licensure and certification credentials are restricted to individuals with master's and advanced level degrees, people with bachelor's degrees can qualify for a number of them. Examples of some of the certifications that may be available to undergraduate rehabilitation majors include Certified Disability Management Specialist (CDMS), Certified Biofeedback Therapist, Certified Psychiatric Rehabilitation Practitioner (CPRP), and Certified Case Manager (CCM). Most certifications require that

you demonstrate knowledge and competencies in a specialized area. Certification is usually administered by a national organization and passing standardized exam is typically required. It also requires having supervised experience, providing letters of reference, preparing a professional portfolio a combination of these.

Licensure is administered by individual states and the requirements are usually similar. Licensure tends to carry more weight than certification, because it has a legal base and restricts practice of the specialty to those wh have earned licenses. States vary in the types of licenses they offer and thei requirements so you will need to check on what kinds of licenses are availat in your own state. Information on both licensure and certification should be available through your academic department. In many states, the licensed chemical dependency counselor (LCDC) only requires a bachelor's degree.

A credential demonstrates that you have met certain preparatory requirements and holding one can put you at an advantage over applicants a workers who do not have one. Possessing a credential suggests to your employer that you will be updating your knowledge and skills through continuing education activities. Virtually all credentials require that you engage in a specific number of continuing education contact hours each yea relevant to your specialization. Most have specific requirements for trainin professional ethics as part of the certification renewal process. Continuing education is an example of the kind of responsibility that you assume as a professional in your occupation. While your employer may not "require" it, you can continue your training through workshops, seminars, and conferenc because of your personal commitment to quality performance as a rehabilita professional.

PROFESSIONAL ORGANIZATIONS

Another valuable resource to help you keep your rehabilitation knowled and skills current is the professional organization. These organizations are designed to provide a collective voice for professionals and to give member opportunities to interact on issues of relevance to their profession. Most organizations sponsor annual or biannual conferences at which practitioners researchers, and experts exchange information on new and innovative practi in the field. Additionally, the organization usually publishes a journal with articles that are of direct interest and relevance to its membership. The jour are one of the most convenient and practical means you have for keeping yo information, ideas, and practices up to date. While new information is usual product of research, most rehabilitation journals are geared to the practitione and the research is presented in a way that can be understood and used by people who are providing rehabilitation services. Another advantage of involvement in professional organizations is the opportunity to become personally active in your profession.

Because professional organizations depend upon the volunteer work of

members, there are opportunities to participate on committees, work groups, special projects, and hold offices within the organization. Students and new professionals oftentimes think that others would not be interested in their involvement, because they are too green. That is a false assumption. The leaders of most organizations will welcome your involvement if you are committed and willing to work. Active participation in a professional organization can be an education in itself and provide you with opportunities for new relationships and experiences that significantly broaden the scope of your rehabilitation expertise.

Here are some examples of associations related to rehabilitation that you might wish to explore:

- The National Rehabilitation Association (nationalrehab.org),
- The US Psychiatric Rehabilitation Association (uspra.org),
- The Association of Persons in Supported Employment (apse.org),
- The ARC (thearc.org),
- The Mental Health America (nmha.org), and
- The American Association of Persons with Disabilities (aapd.org).

HELPING YOURSELF

Finally, your professional development depends a great deal on how well you take care of your personal self. Working with people can be fascinating, rewarding, and fun, but it can also be demanding, stressful, and frustrating. To survive in this business, you need to make sure that you do what you can to keep yourself one-step ahead of its challenges. Too many human service workers burn out of their professions, not because the work is too much for them, but because they did not find a way to maintain their initial interest and enthusiasm. You will have experiences that will make you question whether you were really cut out for this kind of work. You will make mistakes, have conflicts with colleagues, be corrected by supervisors, and watch some of your consumers fail. You will probably come to know the frustrations that accompany working in a bureaucracy and sometimes think that no one except you really cares about the consumer. This is just part of the job, and your professionalism can be measured in part by how you handle it.

To handle these challenges, you must make sure that your life consists of more than your work. You never stop being a rehabilitation professional but you cannot focus on your work all of the time. We have all known workaholics. They stand out in the work setting because they always seem to be working so hard. The problem is that they are the ones who frequently short-change their consumers because they leave the profession early by burn out or by killing themselves with work and stress. You want to develop ways to take care of your physical, social, emotional, and spiritual self by developing balance in your life. Balance takes planning, organization, and will power. Truly effective professionals avoid the temptation to limit their energies to one thing and neglect the other areas of importance.

Another important resource in dealing with the challenges of your profession is the help that is available to you from other professionals. Whe things get too overwhelming in our lives, we should have the wisdom to allo ourselves to work with a counselor who can help us. Too many of us have difficulty in asking for help when we need it. We pride ourselves as special in giving help, but we have a poor track record of requesting it from others. That says much about our confidence in our own business. It is not easy to to someone else for help, yet if no one did, most of us would be out of busin Just because we have a degree in one of the helping fields does not make us immune to the problems, pressures, and misfortunes that everyone experien Working with a counselor can help us learn how to deal with problems and more effectively. Likewise, it usually exposes us to new ways of working n effectively with our own consumers. There are times in all of our careers w we could benefit from a counseling relationship in which we are the consum Use the knowledge that you have about the field of helping to take advantag this resource in your own life.

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