

## THE MEANING OF PRWAD TO THE PROFESSIONAL WORKER

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I think it is quite appropriate on this, our first anniversary, that we be asking ourselves who we really are. Why did we all choose to take time from our jobs to meet together today? Why did we choose last year in St. Louis to add to the proliferation of professional associations already available to us? Who has the time to contribute to the growth of a young organization? Who can afford to belong to one more association?

In spite of these perfectly valid reasons for not joining, we have done so. There must be a reason. There are reasons why we join any association, whether the Brahma Bull Breeders' Association, the YMCA Indian Guides, or the Professional Rehabilitation Workers With the Adult Deaf.

First, we enjoy getting together with people who share our interests, if only for the pleasure of "talking shop." Rehabilitation services for the deaf adult can become dull after a while to the listening next door neighbor or even to the counselor in the next office.

Second, we have something to learn from one another through an exchange of experiences.

Third, we can be far more effective in advancing our objectives when we act collectively than when we go it alone. The labor movement recognized this fact. So does the American Medical Association.

But why should we choose to identify with the PRWAD in particular? Restated, what does the PRWAD have to offer you and me that we do not get from any other professional affiliations?

First, I think we are, as individuals, deeply committed to providing services to deaf people. We are often accused of being narrow minded or provincial in our interaction and activities. So what? Do we criticize the physician who chooses to become more interested in the

and adult needs could only be understood in terms of child development projections to later life. "The child is the father of the man," is an old quotation that has reference here. Presumably, this convenient concept carries an implied meaning that life is a smooth developmental continuum. However, our own experiences and basic courses in the psychology of human adjustment tells us quite otherwise. We are cognizant that human function itself, societal changes and each person's unique environmental situation are factors that cannot be adequately controlled in advance by any degree of childhood manipulation. To state it another way, in retrospect, the man can much more readily evaluate the preparation he has received as a child than the child can predict his own future needs.

In the area of growth and development that falls within the normal range of human function, we can suppose that professional personnel draw upon their own personal experiences and from their environments in general, in order to guide their efforts in preparing future generations. In contrast, however, is the premise for which this organization finds a legitimate basis of existence. Accelerated development of specialists in education, psychology, psychiatry, audiology and rehabilitation provides ample evidence that this is a uniquely specialized area of human function and that diverse ramifications of deafness continue throughout the lives of deaf people.

Beyond descriptions of organizations of the deaf and complimentary articles describing the accomplishments of outstanding deaf citizens from time to time, lies a dearth of professional literature and unsolved human problems begging the attention of the professional community. From the disproportionate professional orientation and activity with deaf children, leaders in the community have stated with considerable chagrin that an uninitiated person might almost form the impression that deafness ceases to exist after the age of eighteen.

Deaf people, even those who have attended educational programs for as long as fourteen years, complain of under-education and under-employment. Many admit to a lack of proper sophistication for the everyday business of life. It remains to be verified whether their complaints have basis in fact, whether programs of life preparation for them are properly ordered or whether a restructuring would be beneficial. It does appear, however, that the organization and orientation of various programs have not been conducted with full professional understanding of the human needs of adult deaf people. Where individual professionals have possessed adequate understanding of the full impact of deafness through adulthood, it seems that the lack of a firm body of knowledge and literature on this level of

human function has prevented them from incorporating these considerations into appropriate programs at lower age levels.

To highlight only one area of this problem, let us consider the status of preparing teachers for the deaf. Until very recently, and at present only with the exception of one teacher training center, to be certified as a professional teacher of the deaf meant to be trained to teach deaf children of beginning school age. An individual interested in professional training as a teacher of the deaf at the secondary school level or in the area of industrial arts likely would be informed that he just did not comprehend the problem. The implication being that the prescription for the treatment of deafness, education or otherwise, is "properly" the child formula. As stated above, this has been another way to imply that deafness ceases to exist at eighteen years of age.

Gradually increased services to adult deaf people will be tangible evidence of action. Even greater in potential will be the body of knowledge that will begin to fill a void for the later training or professionals. Eventually, one would hope that a cross-fertilization of professional training could be achieved between child specialists and those who work with adults. Surely, as needs are professionally identified and solutions developed, a greater possibility of adjustments in programs at all levels can be attained. The PRWAD should be the catalyst for this.

Before solid evidence of achievement can be expected to evolve from this organization, it behooves us to structure fully acceptable professional membership entry procedures. Our organization must be multidisciplinary in membership, yet to accomplish our goals we must have a solid basis of professional standing. The potential benefit of this organization to adult deaf people is without limit. We have far to go in our efforts in the years ahead. Let us proceed with judicious speed, but on a solidly structured professional basis.