THE INDIGENOUS NONPROFESSIONAL, A STRATEGY OF CHANGE IN COMMUNITY ACTION AND COMMUNITY MENTAL HEALTH PROGRAMS. REPORT NUMBER 3.

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and Community Mental Health Programs

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This is the third in a series of reports published by the Mental Health Program of the National Institute of Labor Education. The first report, "Issues in the New National Mental Health Program Relating to Labor and Low Income Groups," was released in June 1963. This report gave consideration to the vitally important questions of increasing the utilization of mental health services by labor and low income groups, and the nature and organization of the community mental health services that are required to meet their special needs.

In the second report, "New Approaches to Mental Health Treatment for Labor and Low Income Groups," released in February 1964, we turned from the broad social view to specific consideration of some of the new treatment techniques and approaches to low income people which are evolving in community programs.

The present report is a discussion of a strategy designed to meet the manpower and programmatic crises that face the new community action and community mental health programs. It is a systematic analysis of the need for and the use of indigenous nonprofessionals as "bridgemen" between the professional worker and low income people.

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(Miss Corinne Schreider, Associate Director of the NILE Program, was of special help in the preparation of this report.)
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I INTRODUCTION

Reaching the lower socio-economic groups and particularly the poor is a growing and vital concern of the professional in human services and the more enlightened public service-minded government agencies. The increasing recognition that there is a vast multitude of people with unmet needs has resulted in two national programs -- the community mental health program and the anti-poverty program. Both of these programs have as their aim to tend to the total problems of those in society whose needs are greatest. Both are concerned with developing programs in the community for these hitherto forgotten people.

It is to the credit of professional and political leaders that both these programs have come into existence as a result of their sense of social responsibility, their vision and initiative, without the stimulus of a vocal and organized demand from the suffering people themselves. But the lack of any such demand from below poses a problem of crucial importance in the design of both programs. What strategies can be developed to convert the very great existing need into effective demand for services? How can we get those who need these services most to utilize the new programs? How can we bridge the gap between these people and the professionals who wish to help them?

A great deal of productive thinking is going into this problem. Many new strategies relating to program, technology, and other aspects are being devised and demonstrated, especially in the field of mental health where planning began earlier.*

* The National Institute of Labor Education Mental Health Programs has published two reports on ways of meeting the mental health problems of labor and low income groups. (42) (46)
The extent to which these will succeed depends ultimately on three factors: whether there is sufficient manpower in the human service professions, whether the service offered is appropriate, and whether it is utilized. These factors are closely interrelated. In this report we wish to propose a strategy which we believe greatly increases the chances of success with all three of these factors. That strategy is a created unity between the skilled specialists from the helping professions and trained workers from the groups being helped (i.e., indigenous non-professionals). Indigenous nonprofessionals can greatly increase manpower resources; they can serve in ways which are significantly more appropriate and which can effectively increase utilization. They can bridge the social distance and bring together the needy and the service, the server and the served.

Professional Role Definition

The traditional view of human services in America is that they are the prerogative of highly-trained professionals with complex specialized skills in the art of helping people. While this attitude has fostered improvements in the quality of service, it has at the same time severely limited the number of people trained to serve and, in subtle ways, produced some gaps in communication with those most in need. Goffman describes a broad current of thinking when he defines the human service professionals as having

"...an expertness that involves a rational, demonstrable competence that can be exercised as an end in itself and cannot reasonably be acquired by the person who is served."*

To a service relationship, the client brings "respect for the server's technical competence and trust that he will use it ethically" and the server brings an "esoteric and empirically effective competence and a willingness to place it at the client's disposal; professional discretion; [and] a voluntary circumspection leading him to exhibit a disciplined unconcern with the client's other affairs or even (in the last analysis) with why the client should want the service in the first place..."*

This definition of roles is commonly accepted by both professionals and clients. To view it negatively, as Goffman does, is to discount the institutionalization of a desirable professional objectivity. To disregard the negative aspect, however, is to shut one's eyes to the dangers of professional role definitions which rigidly restrict the professional in ways which hamper his effectiveness.

How can we preserve the essential professional basis in a service relationship and still insure that the client's total needs are considered? One way is through building into the service structure functional roles for indigenous nonprofessionals. And this way may, at the same time, be the answer to another pressing question -- manpower.

The Manpower Problem

Even with the phenomenal growth of the service professions and training facilities, the demand continues to exceed the supply. Further expansion on a graduate level is necessary, but cannot meet today's intensified need. Construction under the Community Mental Health Centers Act will begin next year. The activities of the Office of Economic Opportunity and regional anti-poverty programs will begin even sooner.

In both these programs, the indigenous nonprofessional can serve, not as a stopgap, but as an intrinsic part of the service machinery, and can help meet the manpower shortage.*

The use of nonprofessionals in capacities higher than the traditional volunteers started several years ago, particularly in the field of mental health. Dr. Margaret Rioch trained a selected group of intelligent, mature, middle-class women to be mental health counselors. (50) Jules Holzberg successfully used volunteer college students as companions to hospitalized schizophrenics. (24) (25) In France, young men and women were trained as "educateurs" to work and live with small groups of mentally ill and emotionally disturbed children. (13) A number of existing facilities designed training programs for their psychiatric aides to extend the range of their work. (15) In educational systems and social welfare structures there has been similar movement in this direction.

Most of these programs see the nonprofessional as an extension of the professional -- an aide who can reduce the burden on the teacher, welfare worker or clinician by doing some of the less technical tasks. In this capacity he has customarily reflected aspects of the image of the professional: he is often recruited from the ranks of those with

* The Joint Commission on Mental Illness and Health recommended in its Final Report (Action for Mental Health) that a national manpower recruitment and training program be launched, and that "the program should emphasize not only professional training but 90 short courses, and on-the-job training in the subprofessions and upgrading for partially trained persons." The Director of the Joint Commission, Dr. Jack R. Ewalt, commenting on "Implications of the Joint Commission Report," emphasized that "however you look at it, the number of psychiatrists, psychologists, social workers, nurses and occupational therapists are inadequate and will remain inadequate in numbers in the foreseeable future. To provide care for our patients will require extensive use of subprofessional personnel."
the same social background, the same attitudes and values, and to some extent the same educational background, e.g. middle-class housewives, college students, etc. (We call these people ubiquitous nonprofessionals, as distinguished from indigenous nonprofessionals.) The ubiquitous non-professional's role as an aide to the professional has in many ways eclipsed his function as an aid to the client. Even so, these programs have demonstrated the potential of the nonprofessional manpower resource.

Reaching the Unreached

More recently, there is a growing wave of plans to use the non-professional in more creative ways.* Schools throughout the country are using parents and other members of the community as "team mothers", parent-education coordinators, and in similar roles. In some neighborhoods, Puerto Rican "informal leaders" are used as liaison between the schools and the Spanish-speaking community. The New York State Division for Youth and a number of other agencies employ former youthful offenders in interviewing and related research tasks. Howard University's Community Apprentice Program trains delinquent youth to be recreation, child welfare and research aides. Homemakers with minimal education and professional training are put to work by many social agencies in clients' homes. The Chicago Area Project uses indigenous organizers for community action programs. Mobilization for Youth, in its diversified activities, employs indigenous leaders, case aides, parent education aides, homemakers and homework helpers and many others. Lincoln Hospital Mental Health Service in New York trains mental health aides for work in neighborhood service centers.**

* This activity has been largely pioneered by Arthur Pearl, Leonard Duhl, and the Ford Foundation.

** We have appended a Bibliography to this report where references to all of these programs are listed.
It is particularly relevant that most of these new positions have come into being in programs for low income groups. One reason is that these jobs offer employment opportunities and thus directly serve to reduce poverty by transforming dependent welfare cases into homemakers, former delinquents into researchers and economically deprived students into tutors. More importantly, these new job categories represent a desire to reach the millions of poor, and especially the hitherto unreachable within their ranks.

As concern increased over social pathology, school drop-outs, juvenile delinquency, drug addiction, and other deep-rooted problems, the difficulties for professionals in reaching the extremely disadvantaged was revealed. These difficulties were based in large measure on the past history of inappropriate and insufficient services for these people, and in part on the lack of utilization of whatever services were offered. There was an obvious need to make and maintain contact with those alienated from the usual sources of service and help.

This is, perhaps, the basic problem the human service professions face today. If it were the manpower shortage alone that had to be met, at least a partial solution would be to increase presently constituted services through using ubiquitous nonprofessional assistants. The deeper problem emerges when we deliberately seek to help those who do not use presently constituted services although their need is most critical. There must be a change in the character of service, a real reaching out into the community and determination to stay involved. This change can only be effected by adding a new member to the "team" -- the indigenous nonprofessional. He can complement the professional by not merely taking over lesser tasks, but by fulfilling newly created ones.
Only a crash program, on a scale large enough to be called a "movement", to recruit, train and employ indigenous nonprofessionals in new capacities can meet the problems of manpower, utilization and need -- problems that continue to grow and threaten to engulf the promising plans for the future.

This report is concerned with the indigenous nonprofessional drawn from lower socio-economic groups. It will describe the characteristics which uniquely qualify him for the human services, with special reference to jobs in the fields of community action and community mental health. It will develop in detail a "new" position -- the expediter -- that can add an important dimension to service programs.* It will analyze in-service problems that may arise and other issues involved in training and employing the indigenous nonprofessional in an economically deprived community.

* Leonard Duhl has similarly developed the concept of expediter as a decisive type of nonprofessional in the mental health field.
II THE UNIQUE CHARACTERISTICS OF THE INDIGENOUS NONPROFESSIONAL

The essential value of the indigenous nonprofessional is his capability for acting as a bridge between the middle-class oriented professional and the client from the lower socio-economic groups. Implicit in the bridge concept is the notion that people drawn from lower socio-economic strata may have special skills for establishing communication across class lines. This ability is rooted in their background. It is not based on things they have been taught, but on what they are.*

Social Position

The indigenous nonprofessional is poor, is from the neighborhood, is often a member of a minority group. His family is poor. He is a peer of the client and shares a common background, language, ethnic origin, style and group of interests which it would be impossible and perhaps even undesirable for most professionals to maintain.

These attributes alone make the worker more acceptable to the client and ward off the suspicion, distrust, obsequiousness or hostility which often characterize the attitude of the poor toward professionals.

Because of what the indigenous nonprofessional is, there are things he can do which the professional is not able to do and should not do. Even professionals who have excellent relationship skills are limited by the nature of their function as an "expert". This definition of role, which they and the poor both hold, prevents the development of a fully rounded, everyday relationship. Yet it is this very type of relationship

* For our illustrations, we have drawn heavily on the Mobilization For Youth papers by George Brager and Gertrude Goldberg (2) (3) (17), describing indigenous workers as they have performed in that program. These papers are a rare source of actual working experience.
that is the key to effective program participation on the part of the poor. And it is this very type of relationship that the indigenous nonprofessional can establish. He "belongs"; he is a "significant other"; he is "one of us". He can be invited to weddings, parties, funerals, and other gatherings -- and he can go. As Brager notes in describing the Mobilization for Youth experience, "The nonprofessionals are considerably less formal. They will hug clients, accept and repay their hospitality, and share first-name designations."(2)

There is nothing unbecoming or unnatural in such behavior from a peer, but it would be inappropriate on the part of a professional. The indigenous nonprofessional can play a more flexible role in a service relationship because there is no set definition of how he must act. As Brager points out, they give more active direction and they are more "partisan". Where a professional worker will "suggest" and "enable", the nonprofessional is "in the center of activity, exhorting... 'clients', training by demonstration, and providing direction."

Know-how

Because of his life situation, the indigenous nonprofessional has acquired know-how in dealing with the problems of the poor. Often he has personally experienced difficulties similar to the ones with which the client needs help. Homemakers employed by welfare agencies, for example, frequently have been on public assistance themselves and have developed special skills consistent with low income living. They "know how to stretch leftovers, use surplus foods, recognize bargains, plan children's schedules, as well as how to deal with merchants and even with public and private agencies". (2)
Their social position enables them to share this knowledge with the client and their know-how adds much greater probability that their suggestions will be appropriate.

**Style of Life**

The "style" of the nonprofessional is significantly related to his effectiveness, because it matches the clients'. This is perhaps best seen in the indigenous nonprofessional's tendency to externalize causes rather than look for internal ones. This tendency is, of course, quite common among low income people in general.

"In instances where case-workers have defined clients as 'neglectful', nonprofessional staff have been more likely to see the behavior as a response to depressed conditions. A homemaker touchingly ascribes the impulsive credit buying of a woman to the fact that 'being young, she wants everything in life'. When the same young woman reports a conversation with her dead husband, the homemaker acknowledges the woman's mental illness and recommends referral to a mental-hygiene clinic, although her further comment suggests that such diagnosis and referral may be the result of supervisory influence: 'My honest (sic) opinion is that she needs to remarry.'" (2)

Another element of style often found among indigenous nonprofessionals is militancy, which is expressed in various ways. They call for action and motion, and are less accepting of delay and "talk". They will introduce new demands, such as "change the Welfare Department rules". While this action approach may, in some circumstances, be unrealistic, it reflects the client's desire that something be "done" to meet his problem.

**Motivation**

Social position, know-how and style are characteristics that enable the indigenous nonprofessional to do an effective job with the low income client. Just as important in contributing to his effectiveness is
what the job does for him. There is a special satisfaction the indigenous nonprofessional gets from the work he does: respect gained from performing a meaningful job in cooperation with professionals, pride in learning a skill, and most of all, a feeling that he is helping others. The significance of the helping role cannot be underestimated, particularly when those who give the help have been recruited from the ranks of those who need it.

People with a problem helping others with the same problem is an approach well known to group therapists. In fact, some people who do not seem to benefit from receiving help often profit indirectly when they are giving help. This may be the case in a wide variety of group "therapies", including Synanon (for drug addicts), Recovery, Incorporated (for psychologically disturbed people), SCORE (Charles Slack's program for delinquents), and Alcoholics Anonymous.

The "helper therapy" principle has at least two important implications for the indigenous nonprofessional of lower socio-economic background: 1) since many of the nonprofessionals recruited for anti-poverty programs will be school dropouts, former delinquents, long-term ADC mothers and the like, it seems quite probable that placing them in a helping role will be highly therapeutic for them; 2) as the nonprofessionals benefit personally from their helping roles they should become more effective as workers and thus provide better help at a higher level of skill. Such a cycle could be an important positive force in a depressed community.

We do not mean to imply that, for these reasons, helpers must always be recruited from the ranks of special problem groups. We have simply tried to focus attention on ways in which the motivation to "help others" has been utilized. It is also important to note that there is a crucial
qualitative difference in this motivation, although it may be identically expressed, between the professional and the indigenous nonprofessional.

Almost every professional in the human services will offer as one of his prime motives for choosing his profession the desire to "help others". It is a sincere and often profound motivation. To the professional, "helping others" is a humanitarian principle, a concept he considers important in his life's work. He sees himself as serving those in need, and his satisfaction lies in providing that service and thus realizing his competence. This attitude can on occasion take on negative dimensions. A professional may see the client as essentially a recipient of his special talents and he may need someone in need -- the client -- to reinforce his self concept as an expert, an authority. To the extent that this is the case, it makes identification with the client undesirable, for if he does lessen the distance between them in any way, he is in danger of losing his status and of undermining his professional role. The implication of patronage and the lack of reciprocity are inherent dangers and even if we guard against them, it may be that the essential nature of the professional-client relationship will interfere with give-and-take.

The indigenous nonprofessional, on the other hand, is a peer of the client and can more readily identify with him. He possesses no special body of knowledge which makes him an expert and can feel, therefore, that in reversed circumstances the client could do the same job just as easily. In the place of subtle patronage or noblesse oblige concepts, he is likely to feel that "there but for the grace of God go I." To the indigenous nonprofessional, "helping others" is a reciprocal process: he may need
help some day and he believes that the very people he is serving may then perform the same service for him.* This is the crucial difference in the involvement of the indigenous nonprofessional: helping others is not a means to self-actualization as it is to the professional -- it is a practical, sensible, concrete, quid pro quo relationship. We are making no value judgments here, but it is important to note that the low income client understands and accepts this kind of help much more easily and more comfortably than he does the help offered by experts whose services he cannot afford and whose less visible motives he may not be able to understand.

This closer relationship with a peer nonprofessional worker may prove to be the most effective way of reaching and involving the poor. It provides a human link to the professional service and makes possible new kinds of programs that are better designed for those who need them and better utilized by them. The possible ways of using indigenous nonprofessionals in community action and mental health programs are varied and numerous.

* There is another underlying quality in this motivation. The poor often seem more willing to help each other in a personal way. It may be the very fact that the help they can give is so limited, or it may be that they have no alternatives, but they are quick to open their doors to family, friends and neighbors -- not simply on the reciprocal basis described, but because they know or remember how it feels to be helpless. This willingness to help is, in a sense, a strength that community action programs can tap.
III JOBS FOR INDIGENOUS NONPROFESSIONALS

IN COMMUNITY ACTION PROGRAMS

In community action programs, the nonprofessional worker may be employed by the central coordinating agency or by cooperating service organizations. Job definitions for nonprofessionals have been developed independently by a number of programs, such as Mobilization for Youth, Lincoln Hospital Mental Health Service, etc. Some of these job descriptions are,

Community Action Aide: to do the "leg-work" for the community action agency through canvassing and other activities so that the program can become a potent force in the community; establish close relationships with local organizations, churches, schools, civil rights groups, etc.

Housing Service Aide: to help organize neighborhood improvement groups; collect and give out information about available housing; talk to groups about home financing and maintenance; refer tenants to other community services.

Homemaker: to work with families or single persons in their homes to help them become more competent in home management; counsel on the use of community resources, such as eligibility for welfare or housing; offer companionship and psychological support; escort to community agencies when necessary or provide baby sitting service during appointments.

Child Care Aide: to work in day care centers as aides to administrative and teaching staff -- take attendance, maintain profiles on the children, help with eating and toilet routines, participate in the educational program under the supervision of the teacher, etc.

Parent Education Aide: to work with the parents to increase their understanding of how their children's performance in school is related to conditions in the home; work with teachers and school administration to help them understand the nature of the children's home life and cultural styles; participate in individual meetings between parents and the teacher.

IN COMMUNITY MENTAL HEALTH PROGRAMS

Our concept of community mental health programs encompasses a broad range of activity combining treatment and prevention. This is based on a
recognition that in extremely deprived communities treatment for mental illness must be accompanied by an attack on the multiplicity of living problems. Ideally, the community mental health program and the anti-poverty program should cooperate and coordinate their work. In neighborhoods where no community action framework exists, however, we feel that the mental health agencies cannot cling to traditional service programs but must engage in and encourage certain action programs. The opportunities for indigenous nonprofessionals in such programs, as outlined below, could of course apply to general community action programs. We present them here in their special significance for the promotion of mental health and the lessening of stress, and as they relate to community mental health facilities.

**Home Service Aide:** to help in the home by counseling on various aspects of homemaking, such as buying and preparing food, raising children, sewing, decorating, etc.; organize groups of mothers for educational programs in these areas.

**Child Service Aide:** to work with groups of children in formal and informal settings (homes, backyards, playgrounds) under professional supervision; promote more significant recreational activities and positive adult relationships; free mothers to keep appointments or participate in rehabilitation programs.

**Case Work Aide:** to help the social worker in interviewing clients and families; do administrative work such as maintenance of files and clinic records; collect record materials from other agencies; identify needs of families in the neighborhood and share knowledge of family with case worker.

**Research Aide:** to work in any agency with a research program, including agency self-evaluation; to interview, record observations, collect data, and help in technical and interpretive aspects of data analysis. Indigenous nonprofessionals can be an invaluable research tool in securing and interpreting information from low-income people.

For the most part, the examples cited indicate new or different ways in which agencies can provide services and multiply their therapeutic functions.
But something else is needed over and above broadening services if the planned anti-poverty and community mental health programs are to be successful. Simply making more services available in the community will not guarantee their use. There must be a worker whose primary concern is the service relationship between agencies and clients; someone who takes the responsibility for putting the client and the service in touch with each other, and sees to it that the client receives the full range of services and help it is in the power of the agencies to give. This person would not directly give service but would see to it that service is given. We call this worker an expediter. We believe that his function is an essential one and that the indigenous nonprofessional is admirably suited to perform it.
The fragmentation of community social and health services, both public and private, is generally recognized as a major deterrent to their effective use by those who are in greatest need of them. The blue-collar worker or low income person faced with scattered facilities, hampered by barriers of language, and embittered by the impersonal, officious and institutionalized manner with which he is frequently met, often is overwhelmed and too often rejects, or is rejected by, the only sources of aid available to him. His problem worsens and multiplies. Only at the point of crisis does he or his family turn again for help.

There is no need to document the wastefulness -- moral, social, financial -- of this situation. It is now being attacked at the most important level -- community planning. One of the basic principles of the new community anti-poverty action programs and community mental health programs is to provide a full range of services and to insure continuity of care or service to the client: 1) by making available a variety of services under a unified clinical and administrative program, and 2) by establishing a clear and workable pattern for interchange and cooperation among various community facilities and programs. This coordination and cooperation is not a simple administrative concern that can be easily handled with a new referral system. There must be a change in the basic attitude of the agency toward the client.

It has been customary in this country, especially in the field of mental health, to content ourselves with merely making a referral without being concerned with whether or not the patient gets there. The principle seems to be that if you leave the responsibility to the patient, those who are "really" motivated will get there. This must be reexamined in
the light of the experiences of lower socio-economic clients. They are generally not sophisticated in maneuvering within the labyrinth of multi-faceted medical and social agencies. They become lost in the process of referral and re-referral. Long waiting lists, unnecessary clinic delays and inadequate treatment have imbued them with a sense of frustration and hostility and sometimes despair. These feelings are so entrenched that new ways must be found to cope with them. The agencies must take upon themselves the responsibility for seeing that the individual patient gets to the service, or gets from one service to another, or even from one agency to another. Without the assumption of this responsibility, the concept of continuity of care or services will become a meaningless programmatic shibboleth. Nor can these problems be resolved through administrative improvements alone. A human link is needed.

"At one time," Miller and Rein observe, "ward-heelers performed the function of getting things done for individual citizens in difficulty. Civil service and bureaucratization have made these pressures less effective, particularly as the urban political machine has declined. A new intervener is needed. In Sweden, this role has been institutionalized in that of the ombudsman, a government official who checks on the various service bureaucracies when complaints come in. He is the war-time expediter but with some influence behind him which permits him to act as an effective source of pressure." (31)

The expediter is the new intervener needed. He would be the liaison between the client and the agency and outside resources. He would be the one to whom the client could appeal for help in finding the appropriate service, or in negotiating the service jungle.

**Precedents**

There is already a large body of knowledge, skills, procedures and experience which can be drawn upon to develop this new job in human services. Before the current movement to correct the fragmented structure
of community resources, some groups were compelled to take measures to unify service on a different level. These groups were in no position to link the agencies to each other to get continuity of service, but they were able to connect their members to each separate service. Two groups which have done this with considerable success are the veterans organizations through their service representatives and the labor movement through their union counselors.

These groups saw the need for a person functioning in such a role when they realized that their members needed help in order to get the full benefits to which they were entitled from public and community service organizations and agencies. Frequently, the main reason the member failed to get these benefits was that he did not know what help was available and how to get it. The original function, therefore, of the union counselor and the service representative was an educational one. They informed the members of their privileges and assisted those who needed help by interpreting the rules, regulations and laws to them. In many instances it was bureaucratic red tape, incompetence or indifference which kept people from receiving benefits. In these cases, the service representative or union counselor often acted as a representative of the member, attempting to break through the unnecessary delay, using if needed the power of his organization as a lever. Where the rules and regulations were unclear, or a person's rights to certain benefits were questioned, the service representative or union counselor performed the function of a lay attorney, arguing the case on behalf of the member of his organization.

The role of the union counselor developed beyond these functions with the growth of private and public services and the expansion of
negotiated benefits. For example, as health insurance programs became recognized as a basic contractual obligation, the union counselor was called upon more and more to refer workers for medical services.

Union counselors and veterans service representatives have helped millions secure the benefits, health and education services which were available to them but which they were not able to obtain by themselves. These two programs have demonstrated the value of designating someone whose primary function is as liaison between the service agency and the client. We feel that the same function should be an essential component of every community action or community mental health program, and we believe that the indigenous nonprofessional expeditor can appropriately fill this role.

What Is the Expeditor's Job

The expeditor is a link between the client and the community resources. As such,

(1) He maintains a complete roster of service agencies and organizations within his community. He knows what types of service they provide and what their rules and regulations are.

(2) He establishes and maintains contact with these community facilities. He gets to know the proper administrative personnel who can facilitate referrals, and he keeps up a cordial relationship with them.

(3) He is the instrument through which interagency referrals are made and consummated.

(4) He exercises tracer and follow-through procedures to see that the client makes and keeps his appointments. He continually checks to see that the client is receiving the maximum potential service of an agency with minimum delay.
(5) He receives complaints from the client about lack of service or quality of service, and investigates them in the client's interests.

(6) He provides the professional members of the service team with information about what resources are available which might meet the needs of the client as defined by the professionals. He takes responsibility for facilitating whatever disposition the team makes.

(7) He interprets his role to all agencies and services and to the community generally.

What Are His Roles

In performing these jobs, the expeditor plays many roles. He may be an

Interpreter -- called upon to interpret to the professionals the particular meanings or attitudes expressed in various subcultural ways of thinking and speaking; or to explain class patterns, values or biases. He may do the same kind of interpretation to the client of a professional attitude or action. He may on occasion have to act as a translator for the various nationality groups present in many communities.

Negotiator -- interceding for the client with a particular community agency in order to break through red tape, to get appointments or benefits. He may negotiate for more expeditious service.

Attorney -- required to act as a lay attorney to argue a case for a client who is not receiving the benefits to which he is entitled under the regulations of a specific agency.

Educator -- informing clients of the kinds of services available to them, and their rights and responsibilities in receiving these services.

Instructor -- teaching the client, if necessary, how best to go about getting a particular service. For example, he might suggest to someone who is going to apply for a job how to dress or how to talk to the interviewer.

Helper -- called upon simply to help in the problem of getting a client to or from a particular service. He may personally go with the client, or he may provide an escort or a babysitter.
In performing these roles, a distinction must be made between the expediter's function and the function of other indigenous nonprofessionals, such as those described on pages 14-15. The expediter expedites, facilitates and improves service: only indirectly does he participate in the healing process. In this respect, his job is differentiated from other proposed jobs of a similar nature, such as case aides, referral agents, counselors and the like, in which the nonprofessional is used in a healing capacity. The indigenous nonprofessional can bring important qualities to the healing function. However, in these jobs, he plays different roles than the expediter does. For example, a case aide can be a

Companion -- called upon to enter into a relationship with the client in which he accompanies him to social functions, educational projects, or even certain work situations.

Counselor -- giving advice about problems of living, child rearing, etc.

Supporter -- offering himself as someone to lean on in situations of stress or want.

Intervener -- becoming directly involved in the client's life to effect changes in the way the client is meeting crises or stress situations.

These can be important roles to play with low income clients, roles which the professional could not or should not perform, or which the client might not accept from him. Because the case aide participates directly in the healing process, however, he stands in a different relationship with the client than does the expediter.

The case aide is a therapeutic agent. He intervenes in the client's life in a way that presupposes a corrective influence on the need which has brought the client to the service in the first place. The expediter, on the other hand, is a service agent. He intervenes in the agency's life in a way that will assure the client that the therapeutic agent
is made available and continues to be available throughout the period of
his need. At times, the case aide may perform some function of the
expediter without risking his usefulness as a therapeutic agent. In
fact, there are times when it might even enhance his healing role. The
expediter, however, should be protected from performing direct thera-
peutic duties, such as case finding, counseling and the like. Agencies
may tend to give more weight to these kinds of familiar functions and to
encroach on the expediter's job to include them. This will devalue the
expediter's role, over-burden him, and confuse him, the client and the
agency about what his job really is.

The expediter is a service finder not a case finder.* His function
is to find the service for the client, not the client for the service.
He is employed to represent the client's interests against all the
tendencies in all the agencies that may delay or deprive the client of
the agencies' services.

Where Is His Base

This job definition raises some important questions. If the
expediter is to be the client's representative, who is to employ him,
where is he based, and how can he develop sufficient "muscle" to be

* We would suggest, in fact, that no indigenous nonprofessional worker
do case finding -- in the sense of evaluating a problem and making
a referral to a specialized agency on the basis of that evaluation.
He is not qualified to determine if, for example, an action is a
symptom of mental illness, or if an unemployed heart patient should
be encouraged to go to an employment service or to the Department of
Public Welfare. If he made such judgments he could create additional
problems for the client and he could undermine people's confidence
in indigenous nonprofessional workers generally. The case aide,
the homemaker, the child service worker and all others should
discuss these problems with their professional supervisors, and
they should be encouraged, in fact, to bring these facts and
observations to the professional's attention.
effective with community agencies? Many different models are possible. Sweden's ombudsman (see Page 18) has his base in the government and his source of power is directly political and official. The service representative is employed by the veterans organization: his power is unofficial, but lies in his affiliation with an important political interest group. The union counselor, usually a volunteer, has his base in the union: his source of power, too, is unofficial, but he has the backing of a local group that has ties to city, state and national union organizations. It would seem apparent that the model which provides the expediter with the most "muscle" is the one in which his power is official. Perhaps some day such an official will be part of every enlightened community.* But his position as a government official would have many obvious negative aspects for the expediter.

All of the examples cited represent expediter's functioning outside of the agency or service structure they wish to influence. Their power derives from their position in other structures and the power emanating from these. They use this power, in a sense, against other agencies to influence them to perform services more efficently for the agency's clientele -- who are also the "clientele" of the expediter's organization.

Another possible model is the expediter based within the service agency itself. Here, his main role is intra-agency, to facilitate service among various departments and offices. For this to work effectively, the agency must have clear and deep commitment to serve its low income clients,

and a strong recognition of the intrinsic difficulties of agencies in serving this function. Moreover, within the agency, the expediter must have an independent or somewhat independent source of power and authority: otherwise, his function may be subverted by the other needs of the agency.

Probably most relevant, however, is the model in which the expediter is part of a complex of services, such as a community action or a community mental health program. In such a complex, he functions in one agency to influence a variety of other agencies in the community. He is employed by the agency and his source of power is the agency's ability to reciprocate in the form of offering expedited services to other community agencies in return for cooperation with the expediter. A cross-referral system can be negotiated at the top administrative level or through the interchange of staff throughout the complex or it can be developed informally by the expediter. This model is most appropriate for poor communities where the problems are multiple and so are the agencies to handle them -- and where people shy away from the bureaucratic style and functioning of these agencies.

Which model is best will only be determined after a period of trial, experimentation and experience. But we are suggesting that requisite to any analysis of the expediter is a concern for the locus of his power, and its focus. Without such an analysis, the expediter concept or role remains flimsy, vague and ideological.

In some models, the expediter does not have as his main focus changing the red tape in the system, but rather circumventing it or providing for the client what Alvin Gouldner calls "green tape". That is, the client receives "special" attention because of his connection with another power structure. In some cases it may go beyond obtaining for the client what is rightfully his, to getting something extra for him,
outside of regular channels. This model does not usually lead to the development of the system toward more expeditious service: the system tends to remain intact. Moreover, nothing happens for the clients who do not have access to the expediter.

We favor a model in which the role of the expediter is oriented toward changing the system to achieve more efficient functioning for all clients. Although the development of this change is produced through particular clients who have a relationship to the expediter, system change is the goal, not special favored service for a small few.

The exchange model, in a community complex of agencies as described above, indicates how the expediter may contribute to and be a part of a greatly increased coordination and integration of inter-agency function. In this model existing practices are not left as they are -- new cross-referrals develop, new channels are provided and new practices in serving are elaborated. We believe that the overall focus of power should be in this direction, toward more expeditious, non-fragmented, continuity of service. The source of the expediter's power obviously will be a major determinant in achieving this.*

In our expediter model, we have not presented him as functioning in isolation from various structures. Rather, we have attempted to introduce ways in which the expediter and the structure may supplement each other with a resulting new integration of service. We feel that, at the present time, the expediter working for low income clients could function

* We have accentuated the power accruing to the expediter through his relationship to a particular structure or institution. But the expediter has other sources of influence that should also be kept in mind. These reside in his personality, his human relations skills, his inside knowledge of agency functioning, and his personal relationship with people in other agencies.
most effectively if he derives his power from widespread community action programs supported by anti-poverty funds, and from comprehensive community mental health programs.

What Does He "Do" for the Agency

The expediter symbolizes the agency's acceptance of the responsibility for the clients receiving the full benefit of the agency's potential to help, not only within its own facility, but in the community generally. We do not think there is any question that this is a responsibility of a community human service organization. There may be some questions, however, about whether a community action or mental health program should put this kind of worker on its staff to discharge this responsibility. Might not the expediter be a "thorn in the side" of the professional personnel? Might he not upset the agency's schedules and procedures? What, to put it bluntly, does the agency gain?

One important gain is that the expediter will play a major role in improving the agency's functioning and efficiency. Frequently he will be able to clarify for the agency behavior reactions that seem incomprehensible or peculiar and that foster harassment and tension in administrative and professional personnel. He can objectively explain to the client procedures or regulations that seem unnecessary or unsympathetic. He will thus intervene in the vicious cycle of misunderstanding, mutual rejection and despair that can so easily build up between the overworked agency and the overburdened client. In essence, the expediter is a needed buffer, absorbing strains from both sides. He is, in effect, a two-way facilitator who can expedite the work of the professionals by seeing that clients keep appointments and follow through on referrals. In this way, he not only serves the client but allows the agency to function more smoothly in achieving its goals and purposes.
Another gain, which we have already stressed, is that the agency's relationship to its low income client will be improved. Low income workers and poor families must be convinced that the new planned programs are different, that their past experiences with service agencies will not be repeated, and that the agencies are serious about wanting to help them. The expediter, a completely new service design tailor-made to their needs, might be the proof they require.

In summary,

1. The expediter provides a bridge between the various services of a comprehensive program.
2. By the very act of placing an expediter on its staff, with sanction to intervene in scheduling and procedures on behalf of the client, the agency provides itself with a form of "quality control" to insure against the dangers of institutionalized practices and procedures.
3. The expediter makes the work of the agency with low income people and the poor smoother. He functions to aid both the agency and the client by providing a human link, a line of communication. He symbolizes to the low income clients the agency's break with past practices and its sincere intention to provide service to them.

For these reasons, the new community action and community mental health programs which are seriously seeking a "new look" will find the expediter a necessary and significant member of their staff.

We would like to emphasize that the expediter's job as we have described it is intended as a model, not a blueprint. It will have to be modified by each agency in relation to its particular structure and activity. But the basic conception must be preserved, we believe, if the expediter is to fulfill his potential.
A specific training program for expediters is being designed at present by the Low Income Center of the Albert Einstein College of Medicine. In this section, we present some general considerations for the training of all indigenous nonprofessional workers. The different jobs they will be doing will require specially designed teaching programs, but the issues treated here will, we believe, apply to all training programs for indigenous workers.

Methodology

Training in a large agency, where several nonprofessionals will be working, may be a separate, highly organized program. In a small facility, it may mean only the professional teaching the nonprofessional his specific job. In either case, there are teaching and supervisory methodologies which are particularly appropriate for indigenous personnel. No matter what the formal training structure is, it should include the following elements:

1. **Continuous on-the-job training** beginning almost immediately.

   Long preparatory training is very dangerous because considerable anxiety develops in the nonprofessional until he gets into "action", more than the normal amount of anxiety associated with any new job. Consequently, it is extremely important that he actually begin performing some tasks as soon as possible. These tasks must be carefully phased: the initial assignments must be relatively simple and within the range of nonprofessional skills; as on-the-job training continues, the tasks should be progressively more complex.
2. An activity rather than lecture approach ("do rather than write?), with a heavy emphasis on role playing and role training.*

3. Building strong group solidarity among the nonprofessional team. This gives the nonprofessionals a strong supportive base and minimizes dangers of imitating the professionals.

4. Informal individual supervision at any time on request, supplemented by group discussion and supervision.

5. A down-to-earth teaching style, stressing clarity and detail, and recognizing that concepts and theory, if properly presented, are definitely within the reach of indigenous personnel.

6. Freedom for the nonprofessional to develop his personal style. Our studies of union counselors and other indigenous workers have convinced us that the worker's personal style is an essential ingredient in the successful performance of his duties. One union counselor, for example, takes pride in a legalistic approach to his job, in understanding the nuances of the laws and agency regulations; another gets his greatest satisfaction from his ability to

*Role playing is the flexible acting out of various types of situations in a permissive group atmosphere, e.g., a homemaker working with a withdrawn client, a community organizer interviewing a hostile tenant. Most role playing situations are acted out by two people with a group discussion following. Since it is free of the tensions of an actual problem situation, role playing stimulates the trying out of new alternatives and solutions. It increases the participant's role flexibility in an atmosphere where he can safely take a chance with different kinds of behavior. (See Frank Riessman and Jean Goldfarb, "Role Playing and the Poor", Group Psychotherapy, March 1964, Vol. 17, No. 1, pp. 36-48).
open doors for people, to manipulate the environment where possible; a third union counselor sees himself as a modified ward politician dispensing benefits to a constituency (he does not do this condescendingly, however). Each is successful in doing his job because he can do it in the way that best suits his personality. Training the indigenous nonprofessionals, therefore, should include techniques for making them aware of their individual style and opportunities to practice developing it.

These components in a training and supervisory program should help cope with the problems which will undoubtedly develop and which could, otherwise, seriously affect the indigenous worker's performance. Some of these problems are:

Assuming Authority

One of the leading complaints professionals make about nonprofessionals is that they are reluctant to assume authority. Many indigenous workers do have some problems in this area because of their personal experience and class standing. In order to know how to deal with these problems, it is important to identify the underlying causes.

Low income people are usually the recipients rather than the dispensers of authority, and frequently their experiences have left them with very negative feelings about certain people in authority. They resist the bureaucratic authority associated with the "power structure", which they feel is not working for them. When the indigenous nonprofessional worker comes to feel that the agency is genuinely concerned with "his people" and is not identified with the power structure, he may begin to feel differently about becoming associated with and assuming authority.
(This point is nicely illustrated in trade unions where large numbers of low income people have accepted authority positions as shop stewards.)

As a matter of fact, when nonprofessionals do accept an authority role they often carry it out very well because, along with their negative feelings, they have some positive associations with authority. The family and church traditions of many groups in the community fully recognize the value of authority, and these people, therefore, do not find it inconsistent with informality and close relationships. They do not have the ambivalence toward authority per se that characterizes many middle-class people who find it difficult to be authoritative without being authoritarian and cannot easily combine authority with warmth. The low income person does not resist authority or power as such, so that once he gets past the initial block concerning his use of formal authority, he may employ it very rationally and smoothly.

Another deterrent to his comfortable use of authority, however, lies in his limited know-how and lack of actual practice in the use of authority. Hence, it is extremely important to provide practice in a permissive setting (such as role playing typical authority situations, like leading a meeting), and to make sure that the nonprofessional is given detailed knowledge about what he is expected to do at every phase of his assignment.

Maintaining Confidentiality

Because of cultural patterns and styles of living, maintaining confidentiality with regard to information received from members of the community can oft a problem. In densely populated areas, there is little opportunity for privacy and it is harder to keep problems or events from becoming public. It may be that knowing that things cannot
be kept personal, there is less inclination to try to keep them so, or it may be that there are fewer of the feelings like shame or guilt that would make secrecy desirable. At any rate, the assumptions underlying the need for confidentiality will have to be carefully discussed with indigenous workers and not taken for granted as they might be with other personnel.

Another aspect of this problem relates to the fact that some of the confidential information the indigenous worker is given must be revealed to various authorities in the agency. The indigenous personnel may not fully trust the authorities not to misuse this information. The agency itself, therefore, must maintain the strictest confidentiality with regard to such material. Training nonprofessionals in the principles of confidentiality will give the agency a good opportunity to establish its trustworthiness to the nonprofessional. And it must continue to demonstrate it.

Losing "Touch" with the Community

Very often the nonprofessional, being pleased with his new status, feels in debt to the agency. He responds by wanting to be very obliging, and adopts what he believes to be the agency's point of view regarding the poor or low income client. This is sometimes expressed in remarks such as, "Too many people around here are lazy, don't want to help themselves." The nonprofessional worker, in overidentifying with the agency in this way, underidentifies with the community. He may begin to feel superior toward his less fortunate fellows. Aside from our ideological rejection of this tendency, it should be obvious that this type of reaction militates against the effectiveness of the nonprofessional as a communication link. Care must be taken in both selection and training to expose and clearly oppose this tendency.
The agency must emphatically show that it does not desire this behavior, that it does not have a negative view of the poor and that its focus is two-way education -- between the community and the agency. Nevertheless, as these jobs develop, it is likely that some distance from the poor may eventuate, and the attendant problems and pressures will probably have to be dealt with continually.

Avoiding Defeatism

Initially, the indigenous worker is likely to be very hopeful about changing the community, and he often expects speedy results. The positive side of this attitude lies in his lack of complacency and his rousing spirit. When things do not move rapidly, however, he sometimes becomes over-pessimistic, fatalistic, and may regress to blaming the "apathetic people" for not being more militant. He may become too easily frustrated by bureaucracy or too demanding in relating to the people in the community.

It is hard to guard against this because the nonprofessional's spirit and verve may be sapped by too great an emphasis on the factors which inhibit rapid change. Moreover, the professional should question his own acceptance of these factors: he might be making allowances or going too slowly when this is not necessary.

An overall approach to the problem should be not to dampen initial optimism, but to present a tentative timetable concerning the expectations for the successful achievement of objectives in the community. A realistic -- but not overly conservative -- estimate of some of the difficulties should be discussed with the nonprofessional, and signposts of progress should be pointed up all along the way.
The Relationship between Professionals and Nonprofessionals

There are many problems involved in defining and developing the relationship of the nonprofessionals to the professionals, both within the agency and outside of it.

Professionals frequently are not clear about the role and the ability of indigenous workers. The agencies should carefully define the nonprofessionals' roles, tasks and competencies to all professional personnel (including those in outside agencies) through memoranda and formal and informal meetings, both before the nonprofessionals join the staff and as their jobs develop. This will be a crucial point in determining the success of the nonprofessional program. The professionals will need to have the flexibility to appreciate and understand the non-professional roles and aptitudes and to permit the reorganization of job structures. Great effort, therefore, must be put into preparing the professionals for accepting the indigenous workers into the team structure, for utilizing them appropriately and for allowing them to develop their own techniques in working with clients. While professionals may express this flexibility during the planning and training periods, the agency must watch to see that the voiced acceptance is being followed through on in the actual operation.

There should also be careful preparation and training of the non-professional before initial contact with professionals: their skill and confidence should be sufficiently developed so that they will feel comfortable. Relationships to professionals in other agencies should be held in abeyance until more skill has been acquired. Let the indigenous worker develop "practice" with professionals in his own agency first. (The use of role play practice might be quite advantageous in preparing nonprofessionals for interpersonal face-to-face meetings,
telephone conversations and other aspects of the relationship to professionals.)

The indigenous nonprofessional should be given special training in how to participate in team conferences which include professionals. He should learn how to share his special knowledge of cultural styles and his observations of clients in the community.

Sometimes, in accenting the value of the nonprofessional, there arises a tendency to devalue the professionals and emphasize their difficulties in reaching many of the poor. We urge both trainers and nonprofessional workers to guard against this reverse alienation. We do not propose that nonprofessional replace professionals. In fact, the employment of indigenous personnel will produce new roles for professionals as consultants, supervisors, teachers and coordinators. We believe the professional and nonprofessional will complement each other, that each has a separate and important contribution to make toward achieving the common goal.

Servants and Servers

The indigenous worker is not a servant, but a server: care must be taken that he not be given only the menial tasks which professionals shun. He will, of course, have to do such tasks, but he must also be assigned more meaningful functions, increasing in proportion as he advances in position. Actually, nonprofessionals can do some meaningful work from the very beginning, commensurate with the natural human relations skills they possess, such as field work with people in the community.

Career Development

In a broader sense, the problem may be that the new nonprofessional positions will provide jobs but not careers -- that there will be no
provision for advancement, or that whatever advancement takes place
will be essentially rather narrow. The concept of employing indigenous
nonprofessionals calls for the possibility of promotion to various levels
of subprofessional and professional positions. For this to occur, both
public and private sector requirements will have to accept combinations
of work experience plus education which can be acquired concomitantly
with employment or intermittently with leaves of absence. New employment,
civil service and educational practices will be needed to help the
indigenous nonprofessional continue to develop.

"Mortality" -- Turnover and "Burn Out"

The high turnover rate among psychiatric aides working in hospitals
is well documented. In contrast, there has been practically no turnover
among the Parent Education Aides, Visiting Homemakers and Community
Organizers employed at Mobilization for Youth, and a similar phenomenon
is reported among the Team Mothers and School-Community Coordinators
employed in the Great Cities projects in Philadelphia and Pittsburgh. (20)

Granted that it may be premature to make comparisons since these projects
are comparatively new, we still think there is an underlying significance.
Rachel Robinson notes the inadequate training of psychiatric aides and
the poor relationships with professionals as important contributing
causes to the rapid turnover. (51) Unquestionably, also, the assignment
of much unpleasant menial work plays a part in this problem. The two
programs mentioned above as having only slight turnover train and use
their nonprofessional workers on a much higher level and this probably
accounts for their success in meeting the turnover problem.

Another hazard in some nonprofessional jobs is "burning out". This
is especially prevalent in child care work, work with delinquent youth
or drug addicts, and in other areas where there may be especially strong demands or overidentification. "Burning out" can have an extremely harmful effect on the nonprofessional, and it can ro... the human service agencies of many valuable workers.

In other sections we have already outlined essentials which would contribute toward maintaining high morale and would limit turnover and "burn out". Other factors would be: appropriate training oriented toward controlling overidentification with the client; insuring that the nonprofessional is genuinely listened to as part of the professional-nonprofessional team; providing group satisfactions both in the training period and on the job; providing career advancement lines to counteract boredom and facilitate job changes for "burned out" personnel.

These potential pitfalls have been presented as caution lights for institutions that undertake to develop jobs for indigenous nonprofessionals. We do not believe either that these are unavoidable, or that they need necessarily occur. Awareness of possible difficulties, however, may represent an important deterrent to their emergence and spread. Enthusiasm for a nonprofessional program without this awareness could easily turn to cynicism and defeat the growth of the indigenous nonprofessional movement. On the other hand, overemphasis on the problems to be encountered, without the working context of spiritua activity, could discourage experimentation. Indigenous workers are no panacea, but properly selected, properly trained and properly used, they can be an important new force in the human services.
VI RECRUITMENT AND SELECTION

It may seem out of place to deal with recruitment and selection last, but it is important to understand first what the indigenous worker is going to do and what problems he may meet as preliminaries to deciding who is best qualified.

While specific qualifications will depend on the specific job, such as expediter, there are some general guidelines to follow in selecting indigenous personnel for human service work. The basic criterion, of course, is that they be indigenous. This is obvious, but it bears stressing. Not only should they have been raised in the particular cultural milieu or environment, but they should have continuing and close association with it.

The best place to start recruiting, therefore, is through local agencies and neighborhood groups. The local offices of the state employment office, the department of welfare or other public or private agencies having direct contact with people may be able to suggest names of former or present clients. Church groups and fraternal societies should be contacted, as well as other formal and informal community organizations. Another good source is to ask interviewees for names of other possible applicants. Explain generally what the agency plans to do without being too specific about the job itself. Otherwise, people will "reject" possible suggestions without really understanding what the job requirements are. The agency should try to get as broad a base of suggestions as possible.

Don't look for the indigenous "leaders" only -- get the name of anyone in the community who has come to people's favorable attention in one way or another. This will probably guarantee that they possess some of the following necessary qualities.
The people selected for nonprofessional jobs should have their roots and interests in the community. They should not be too far removed from their neighbors in terms of education, previous position or economic standing. More important, they should be close to their neighbors in the sense that they "care", that they haven't turned their backs on them, that they are concerned about the problems in the community. They should not, however, be overwhelmed by these conditions, or feel defeatist, or extremely antagonistic or hostile. Let us emphasize that this is not a search for the ideal workingman or low income person. It is an attempt to recruit those in the community who have "strengths" that can be used in attacking the problems of poverty and the poor.

One of these strengths will be the ability to work comfortably with others on agency staffs. The indigenous nonprofessional should be able and willing to communicate across class lines, to function in an intermix, and to accept supervision. A note of caution: there will be a tendency for the interviewer to select those candidates with whom he feels most at ease and this may be based on a "middle-class" outlook expressed by the applicant. This outlook might interfere with the successful performance of the very job for which he is being interviewed. The important question is not how the interviewer relates to him -- this is only one part of it -- but whether he will be able to do the job.

Above all, the indigenous person selected for a nonprofessional position should show a capacity to learn and to develop, and a deep desire to do so. If he comes with a sincere interest, concern and willingness, he may be trained in whatever else is needed.
VII CONCLUSION: A STRATEGY OF CHANGE

It may be argued, as Miller and Rein argue, (31) that the role of the indigenous nonprofessional can be "pasted on to existing practices without forcing any changes in them"; that the tactic of using indigenous workers does not "readily answer the ideological issues of the changing ends and goals of social services today and tomorrow".

There is no question that if an agency wishes to utilize nonprofessionals in a negative fashion -- that is, not to change its goals but to reinforce them, not to serve the poor but to provide a facade -- this can be done. It can be done through recruiting and selecting the "wrong" kind of nonprofessionals; training them in the "wrong" way; and finally, by using the nonprofessional's skills in the direction of maintaining the agency's status quo. Such an approach could effectively destroy the purpose of an indigenous nonprofessional program (and it might, indirectly, defeat the agency's program for working with the poor).

But given the current background of the manpower shortage, the anti-poverty climate, and the criticism of social agencies with regard to their treatment of the poor, we argue that the utilization of indigenous nonprofessional personnel is likely to be quite strategic. It is not the use of indigenous workers in the abstract which will foster change of agency outlook and program, but their use in the context of other pressures in the same direction -- for example, government funding and support through the Economic Opportunity Act and the Community Mental Health Centers Act. The indigenous nonprofessional, working in this context, can help pull together a variety of factors moving toward new agency orientation.
One factor is new technology. (We emphasize, however, that it can only be successful in changing agency function in combination with other factors.) Throughout this report we have expressed a view that indigenous nonprofessionals carry within them the potential for influencing the re-organization of agency technology. It is the nonprofessional who can demonstrate new kinds of therapeutic intervention unavailable to the professional: he can be a companion and an active intervener, he can provide directive counseling and the like. In combination with professional objectivity and competence, and with overall professional direction, this new unity of technology has enormous promise.

There is another very important aspect to the potential power of this new organization of personnel. The indigenous nonprofessional, as he makes a contribution to service, becomes more and more needed by the agency. His usefulness perpetuates his use and increases the significance and power of his role. At the present time, the need for him in terms of serving the poor (for the many reasons we have described throughout this report) is stimulating many different agencies to consider the use of indigenous nonprofessional personnel for a variety of reasons -- some good, some bad. Some want to give aides to the professionals, some want to serve the poor for ideological reasons, some want to provide employment for the poor, some want to try new things, some want publicity, some want government funds. But they all add up to the possibility of widespread use of this new type of personnel. And we believe that regardless of what reason was behind employing the indigenous worker in the first place, in time -- if he is given an opportunity to do a meaningful job -- he will become indispensable to the agency and influence its functioning. Other agencies, not under pressure at this time to change their style,
will want to adopt the indigenous nonprofessional model once it is successfully demonstrated.

We believe that the introduction of indigenous nonprofessional workers into agency structures can be an effective strategy of change in the field of human services. It can meet many of the present needs.

1. It can markedly reduce the manpower shortage in the social service fields.

2. It can help make the professionals' role definitions more flexible, creating an alliance between professionals and nonprofessionals which will allow the professionals to more fully play their technical roles.

3. It can provide more, better and "closer" service for the poor.

4. It can rehabilitate many of the poor themselves through meaningful employment.

5. It can potentially provide millions of new jobs for the unemployed in social service positions which are not likely to be automated out of existence.

It is our intention in presenting this material to stimulate interest in and discussion about the uses of indigenous nonprofessionals in the designs of new community action and community mental health programs. The success of the new programs will, in large part, depend on the professionals' understanding of the potential that is opened up by the creative use of the indigenous nonprofessional. It is our hope that this report may contribute to that understanding.
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