At the outset, social service agencies and numerous public agencies initiated as a result of the Economic Opportunities Act of 1965 were excluded from the scope of this paper. Several subtopics concerning paraprofessionals deserve consideration: (1) the need for paraprofessionals in public rehabilitation agencies; (2) the attitudes of rehabilitation counselors toward paraprofessionals; (3) the actual and desirable role of paraprofessionals; (4) the functions within the domain of the rehabilitation aide; (5) the function of the paraprofessional as an agency ombudsman; (6) the work motives of the paraprofessional; and (7) the question of whether the paraprofessional position should be a terminal position or one subject to career ladder procedures. Brief discussions of each of these topics utilizes pertinent research where applicable and provides answers where needed. (TL)
Before the content of this talk is outlined, I would like to define and limit the scope of the term "public agencies." For the purpose of this paper such traditional rehabilitation agencies as the Division of Vocational Rehabilitation and the various Services for the Blind are included. Specifically excluded are social service agencies and the numerous public agencies which were initiated as a result of the Economic Opportunities Act of 1965. Parenthetically, Reissman (1965) noted that over 24,000 para-professionals were hired in poverty-type agencies since the passage of that act.

Concerning para-professionals in public rehabilitation agencies, several sub-topics deserve consideration. First, it might be useful to consider the need for para-professionals in public rehabilitation agencies. Second, we will review the results of some recent research concerning the attitudes of rehabilitation counselors toward para-professionals. That is, to what extent do rehabilitation counselors believe para-professionals can carry out some of the tasks which rehabilitation counselors now perform? Third, a major area of our discussion should be the actual and desirable role and functions of para-professionals in public rehabilitation agencies. Specifically, what tasks can para-professionals perform which rehabilitation counselors are currently performing? More importantly, what roles can para-professionals take which will facilitate the rehabilitation of clients who,
in the past, may not have availed themselves of public agency services? Fifth, we will briefly review some of the functions which Pearl and Reissman (1965) suggested were in the domain of the rehabilitation aide. Sixth, the para-professional as a client advocate or as an agency ombudsman will be considered. Seventh, we will briefly analyze the work motives of the para-professional. That is, how are the para-professional's work motives similar or different from the work motives of most people? Last, we will raise the question of whether the rehabilitation para-professional position should be a terminal position (assuming economic, social and personal rewards) or whether it should be a temporary job from which the para-professional can elevate himself toward more professional jobs through career ladder procedures.

Do we need the para-professional in rehabilitation counseling? One is quite likely to address himself to that question if there are needs in rehabilitation counseling and in public vocational rehabilitation agencies which are not currently being met. If we believe there is no shortage of professional rehabilitation counselors to carry out the traditional rehabilitation counseling functions, and if we believe that all types of clients including the disabled and the culturally disadvantaged are receiving effective rehabilitation services, then the question, as posed, may be irrelevant. However, taking the opposite position and noting needs within the field of rehabilitation counseling and vocational rehabilitation, one may believe that para-professionals are needed because there is a shortage of rehabilitation counselors, because rehabilitation counselors are not functioning effectively with every type of client, and because the manpower
situation will definitely get worse.

In many states counselor aides have been in use for a number of years. Ralph Peckham has written several recent articles concerning the work and problems of para-professionals. Dr. Peckham is the DVR Director for the State of Michigan. In Ohio, counselor aides have been working on rehabilitation teams for the last several years. A team consists of a rehabilitation counselor, a counselor aide, and a secretary. In many other states rehabilitation aides have been on the job several years. In New York there is much resistance to the installation of such support personnel.

What do rehabilitation counselors say when asked to specify the kinds of tasks which they believe para-professionals can adequately and effectively handle? In a recent study concerned with the role and functions of rehabilitation counselors (Muthard and Salomone, 1969), counselors indicated that support personnel could handle only very routine and repetitive tasks. Twenty-five percent of the sample thought counselor aides could conduct intake or screening interviews, and provide placement assistance to members of the client's family. Ten to 25% of the counselors thought that aides could perform a wide range of information gathering, coordinating, orienting, information giving, and clerical tasks which are now an integral part of the counselor's job.

A stratified random sample of 378 rehabilitation counselors, from almost every state, was used to obtain responses to a number of task inventories and other questionnaires. Although rehabilitation counselors would gladly give up some of their duties, such as placement tasks and social-family tasks, they would delegate these tasks only to persons whom they felt were pro-
fessional (i.e. placement counselors, social workers, etc.). Thus, rehabilitation counselors in general seem to be threatened by the growing utilization of rehabilitation aides in public and private agencies. As Patterson (1968) noted, rehabilitation counselors seem to resist giving up coordinating functions and may "not want to become professional counselors." Patterson suggested that the solution to the critical manpower problem lies in the establishment of two job positions: professional counselor and coordinator. Patterson believes the professional counselor should be totally responsible for the counseling job duties and the coordinator for all other non-counseling activities.

What rehabilitation counselor tasks can the counselor aide perform? In my opinion, the counselor aide should not be equated with a clerical helper. The aide should be given para-professional status and should be trained to effectively and efficiently perform a variety of tasks and duties. These would include case finding, screening and intake interviews which were primarily information gathering interviews, modifying the client's expectations of the agency to be more in tune with reality, defining the role of the agency and the roles of the professionals within the agency, building a relationship and some rapport between the client and the agency professionals, carrying out group counseling procedures concerned with specific reality issues such as placement preparation, work adjustment, and self care, and lastly, assuming a teaching function - such as teaching job finding techniques and teaching clients how to use community resources. I do not believe that para-professionals should be asked to perform such tasks and duties as vocational assessment, psychological testing or interpretation, or vocational and
psychological counseling. These are professional functions which should remain within the domain of the Master's educated, professional rehabilitation counselor.

The para-professional in rehabilitation could also be a facilitator or liaison between clients and agency personnel. Rosenfeld (1964) believed that para-professionals should help the non-users of professional services become users. Smith and Hobbs (1966) noted that the para-professional as a facilitator may be able to provide clients who are alienated from organizations, agencies, and power with the interpersonal contacts and communications they need.

Another function of the para-professional, to some extent, is to provide a role-model for the persons (clients) with whom he may work. For example, if a person from a poor neighborhood becomes a para-professional--a street worker--he can then become a model for the other persons in that neighborhood who also wish to succeed in present day, American society. Rosenfeld suggests that these para-professionals can provide a model with which hard-to-reach clients can identify. The para-professionals can therefore reduce the distance between professional helpers and persons who do not typically use community agencies.

Pearl and Reissman (1965) suggest that there are two main functions that the rehabilitation aide can perform. Several elements of the "healing function" would include the listening role, the supportive role, and the ego-expansion role (i.e. to help one understand reality). Another suggested function is the "service function" which, essentially, is the expeditor role in that the para-professional should be able to cut red tape and obtain
needed services for his clients.

A recent proposition concerning the role of the para-professional is that of the client advocate or the client-agency ombudsman. In this instance the client would expect the para-professional to act almost entirely on his behalf. The para-professional is not viewed as an agency representative, although receiving a salary from the agency, but as an individual who will aid the client deal with, work around or avoid agency rules, regulations, and rigidity. The para-professional as an ombudsman is seen as a person who holds some power to make change or to influence those who are capable of instituting agency change. In 1970, we would all agree, the para-professional is not likely to become a client-agency ombudsman.

In general, what are the work motives of para-professionals? Too often professionals may believe that support personnel are entirely motivated by altruistic and humanitarian motives. It is reasonable to believe that para-professionals are desirous of helping others, especially persons who occupy the same social positions which the para-professional occupied. Yet, since para-professionals are people, it is likely that they have the same traditional work goals (i.e. job satisfaction, status, high salary, etc.) as most other people in society. Thus, many para-professionals will attempt to move upward toward the professional levels. In terms of Maslow's (1954) need hierarchy these persons, like most other people, also desire fulfillment of basic physiological needs, safety needs, and belongingness and love needs. Beyond this we could be confident that most people would also wish to have their needs for esteem and for self-actualization met. My point, in essence, is that although we might expect a greater degree of dedication from para-
professionals than from middle-class professionals, we should also recognize that para-professionals, being people, have the same kinds of needs and aspirations as we all do.

The last topic is an open question. Should the para-professional position be a terminal position or should it be a temporary job leading to higher professional levels? If it is a terminal position, then, without a doubt, the economic, social and personal rewards must increase from year to year so that the para-professional can remain and grow in his job. However, if the para-professional rapidly moves toward professionalism, it is unlikely that he will maintain the contact and rapport he has developed with his clients. In other words, if the para-professional leaves the streets for the suburbs and the town houses, can we expect the continuance of his effectiveness with disadvantaged and poor clients? I doubt it. The para-professional, in my opinion, should earn a respectable salary that grows from year to year. Similarly, his job responsibilities should increase but he should not be sidetracked to administrative or professional activities. The Peter Principle, in this case, would suggest that para-professionals like other people, if provided the opportunity will ultimately reach their levels of incompetency.
REFERENCES


