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## ABSTRACT

A study was conducted to examine the utilization of paraprofessionals in rehabilitation and social service agencies. Data were obtained through interviews with the directors of 46 public and private rehabilitation and social service agencies. The two types of agencies were compared on 9 sets of variables: manpower, funding, interorganizational linkages, recruitment, hiring practices, community linkages, client population, adequacy of services, and use of paraprofessionals. Results are tabulated and described. The structure and functioning of 23 rehabilitation and 17 social service agencies were then examined to determine the influence such characteristics might have on the agencies' utilization of paraprofessionals. One year later, agency directors were contacted again by mail questionnaire and telephone. Directors generally viewed paraprofessionals as lacking educational credentials; few were aware of the New Career model emphasizing empathy, "indigenous" background, and the ability to learn on the job. Less than half the agencies do not utilize paraprofessionals, but little adherence to the New Careers model was evidenced by those who do employ them. Supervision and control does not encourage these workers to use their special skills. The followup survey indicated little change in the use of paraprofessionals. (KM)

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# New Careers and Agencies:

## Views From The Top

## Rehabilitation and Social Service

## Working Paper #3

1973

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Case Western  
Reserve University

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**NEW CAREERS AND AGENCIES: VIEWS FROM THE TOP  
WORKING PAPER #3**

**REHABILITATION OCCUPATIONS FOR THE  
DISADVANTAGED AND ADVANTAGED**

**A Program of Research on Occupations and Professions  
in the Field of Rehabilitation**

**Supported in part by  
The Rehabilitation Services Administration  
Project Number 12-P-55206/5-03**

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## PREFACE

A study of rehabilitation occupations for the disadvantaged and advantaged is presently being conducted at Case Western Reserve University in cooperation with the Rehabilitation Services Administration. The "disadvantaged" are those who have had an irregular work history; they tend to be the poor or members of minority groups who have not had the education necessary to qualify for any but dead-end jobs. New Careers programs are designed to meet the needs of this group. The "advantaged" are older workers who already have extensive job histories but are looking for a second, more satisfying career; they are the potential Second Careers group. Both New and Second Careerists are candidates for paraprofessional work in rehabilitation or for training in professional rehabilitation careers.

In addition to the research on which this paper is based, the Rehabilitation Careers Project involves a population survey of the greater Cleveland area to determine interest in New Careers, Second Careers, and human services employment. Two additional projects of this research program will aid in analyzing the extent of New Careers and Second Careers engagement in the entire rehabilitation work system: 1) a study of New Hires in rehabilitation agencies throughout the United States and 2) a follow-up of students previously trained for rehabilitation work.

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## I. INTRODUCTION

Much has been written about the need to provide innovative personnel in human services, and to develop new job opportunities for the poor in various social agencies. Very little empirical research has been done, however, to determine if agencies hire the poor to fill their manpower needs and if they view the growth of a cadre of such workers as a desirable development. The purpose of this paper is to explore how rehabilitation and social welfare agencies in one midwestern community have handled the consequences of the "New Careers" movement.

The term "New Careers" refers to programs, funded by government monies, which hire and train the poor for employment in human service agencies.<sup>1</sup> "New Careerists" are part of a growing number of agency workers called paraprofessionals, or new professionals. These are persons who work in human service but without the formal credentials of "professional" training. Professional training, which is generally long and on the graduate level, theoretically provides a worker with a unique scientific body of knowledge and reinforces a service orientation. Because of this knowledge, skill, and dedication to the client's welfare, the professional is granted autonomy, or freedom to work unsupervised except by peers (for discussions of professionalism see Hughes, 1963; Wilensky, 1964; Høug and Sussman, 1969 and Freidson, 1970). While the terms "New Careerist" and "paraprofessional" are used interchangeably in the discussion below, it should be noted that New Careerists are only one kind of paraprofessional worker.

### The New Careers Movement in Theory

The underlying theory for the New Careers movement was first outlined by Arthur Pearl and Frank Riessman in their book *New Careers for the Poor* (1965). They suggested that by hiring the poor to serve the poor, agencies would not only provide gainful employment for the previously unemployed and make necessary services available to more clients but also would free professionals to devote themselves to the more highly skilled aspects of their work. In addition, the new workers would be provided with permanent employment which would allow for job advancement through on-the-job training and the establishment of a "career ladder." The general quality of agency services would not be sacrificed but would instead be improved because the agencies would be able to provide services to more clients.

Moreover Pearl and Riessman believe that the New Careers movement would not just benefit the new and old agency staff members but also the clients. Since the newly recruited workers, the "paraprofessionals," come from the same areas and experience the same kinds of problems as the clients, they would be better able than middle class professionals to recognize and respond to the needs of those they were aiding. In addition to providing more accessible and personal service, the new workers would also become role models for the clients

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<sup>1</sup>Human service agencies are organizations in the fields of health, education, and welfare whose goals are to provide material and nonmaterial assistance to individuals facing crises.

since they had successfully handled the exigencies of poverty. Finally, since the New Careerists share the same background and life styles as the clients, they would not arouse the suspicion, mistrust, or hostility that professionals often do. Thus, according to the New Careers model, the paraprofessional would be able to serve as a "bridge" between the agency and the client.

### **New Careers in Practice—Challenges to the Model**

The New Careers model moved from theory to reality when funds were allocated under the Scheuer Amendment to the Economic Opportunity Act (1966). This and a number of other laws spawned the development of New Careers programs across the country. As agencies began to consider hiring these workers, a variety of questions were raised concerning the efficacy of the program from the points of view of the agencies, professionals, paraprofessionals and clients. Some of these questions and problems will be outlined briefly below and then will be re-examined with data from a survey of 40 rehabilitation and social welfare agency administrators.

A first point to be considered is that the passage of New Careers legislation was in part predicated on the assumption that there was a shortage of workers in the rehabilitation and social services field. This shortage was the result of the expansion of services, a lack of trained professionals and high turnover among employees due to unpleasant working conditions (Elston, 1968:66-67). However, after the Scheuer Amendment was passed, U.S. involvement in the Vietnam War increased, with concomitant cuts in human service agency budgets. This was followed by a general economic slowdown which produced fewer possibilities for job turnover even among dissatisfied human service workers. Agency willingness to hire new, generally unskilled workers, if present before, may have been lessened. Thus, despite the assumption of a need for more workers, the question arose, were agencies actually able to hire them?

Second, if new paraprofessionals were hired, what happened to them? They might be viewed by the other workers as "professionals *manqué*" rather than as unique additions bringing special skills. In this case, the professionals may have attempted to mold them into their own image which would be incompatible with the paraprofessional's retention of his indigenous qualities. Alternatively, the professionals may have attempted to "underprofessionalize" them by assigning only the most menial, routine, "dirty work" aspects of the job (Genet, 1965:205-206). By defining some duties as subprofessional and then assigning them "to less favored occupational groups" (Scott, 1969:113), professionals may have rid themselves of unpleasant tasks. But, in assigning such jobs to the paraprofessionals, agencies may have forced the new workers into more dead-end jobs rather than, as planned, encouraging their job advancement or enriching their job opportunities.

This phenomenon is related to a third area of possible conflict—the extent to which professionals perceive the new workers as a threat to their own autonomy, status, and prerogatives. As studies of rehabilitation counselors indicate (Sussman and Haug, 1970), workers in human services have been striving to become more professional. Such professionalization emphasizes



intensive formal training, or "credentialing." It is assumed that human service workers must be highly trained in order to protect their clients' interests; this is necessary because the professional must often intervene when the client is least able to defend himself and is most vulnerable to the danger of mistreatment (e.g., in family crises or mental breakdown).

Given their own status and the training they have received which emphasizes the exclusiveness and the difficulty of the tasks they perform, some professionals are reluctant to share any but the most menial activities with paraprofessionals. Furthermore, they assert that the client has to be protected from well-meaning individuals, like paraprofessionals, who because they lack the necessary training might unwittingly injure the client while attempting to help him. Thus, based on the reality of some complex professional skills and partly, perhaps, on a need to guard newly gained "professional turf," some professionals may be unwilling to turn over any responsibility for the client to the paraprofessional.

Efforts to carve suitable duties out of the professional's role have also met with resentment because of the additional burden of supervising the paraprofessional's work once the division of tasks has been decided. The relief that the paraprofessionals offer the professionals from the more routine tasks may be negated by the time and effort that must be expended for adequate training and supervision. Before the nature of the paraprofessional's role can be determined, the nature of the *professional's* role must be assessed. This assessment and allocation of ancillary functions to the paraprofessional may result in an "identity crisis" for some professionals (Pearl and Riessman, 1965:53-57).

A fourth problem area is the paraprofessionals' perception of their work roles. Professionals have often complained about the paperwork, red tape, and administrative functions which keep them from doing the work for which they were trained. Some therefore regard the paraprofessional as an aide or assistant whose purpose is to relieve them of routine, time-consuming tasks; however, they further assume that this worker would certainly not be involved in diagnosis or treatment for these are, after all, the activities for which the professional obtained long training. Thus, according to this view, the paraprofessional may help improve service delivery, but only indirectly.

Some of the new workers reject these assertions. They regard themselves as advocates or in house ombudsmen for the client apart from the agency and its professionals. It might be said that they maintain the perspective of the client but with certain powers delegated to them by the agency. They may view themselves as interpreters for the agency, relating the client's needs to agency resources, and facilitating the meeting of these needs by helping the client to deal with what he may perceive as the overwhelming bureaucratic apparatus that stands between him and what he wants or requires. The paraprofessionals base their claim for this role on their indigenoussness. They assert that because they come from the client population they share common attitudes, values, and behaviors which facilitate the establishment of rapport. The latter is felt to be essential to treatment. It follows that since the paraprofessionals claim to be better

acquainted with the clients, their background, and their problems, they feel that they are in the best position actually to render treatment. According to many paraprofessionals, the professional because of his middle class origins and years of formal training has increased the social distance between himself and the client, thus impeding the development of understanding and rapport.

An explanation for both professional and paraprofessional concerns arises from the indeterminate roles of workers in some professionalizing fields. In essence the conflicts that may arise between professionals and paraprofessionals which appear under the guise of fears of being supplanted by cheap labor or devaluation of the professional derive from the problems of occupations such as social work and rehabilitation counseling. Over the past few decades both have directed their efforts toward establishing themselves as professionals. There have been a number of factors hindering progress among social workers, such as the preponderance of women, the working and lower middle class origins of practitioners, the relatively short training period, and the absence of a well-developed body of theoretical knowledge (Toren, 1969:168). However, one of the most critical factors with respect to the claims of indigenous paraprofessionals is social work's inability to prove "exclusive competence" (Toren, 1969:146). The basic issue centers on who is best suited to give service to whom. Scott has argued that "there is no single indicator or set of indicators for accurately assessing the quality of performance for a social worker" (Scott, 1969:101). This accounts for the fact that if there is some duplication of functions between professionals and paraprofessionals and this becomes apparent, there will be charges by the paraprofessionals that there is no difference between them and "the better trained and more highly paid professionals" (Riessman and Popper, 1968:7).

For this reason several agencies have experimented with isolating the paraprofessionals and the professionals in various ways to avoid the possibility of comparison. For example, welfare agencies have isolated them by task, person, and place. These agencies are currently in the process of restructuring their organizations with professionals in the "Social Service Department" and paraprofessionals in the "Assistance-Payments Department." Other agencies have organized so that professionals are in the office on three days of the week while the paraprofessionals are in the office on the other two working days, the alternate days being spent in the field. The rationale underlying such steps, whether explicitly stated or not, is either isolation in order to prevent opportunities for conflict from materializing or the establishment of some sort of mediating structure between the two groups.

A fifth problem area is the client's perception of the paraprofessionals and how, if at all, this can be handled by the agencies. Clients' opinions of these new workers range from resentment at the kind of treatment provided by a status peer to happiness at finding someone who not only listens and understands but who also has experienced many of the same problems they are facing.

Finally, it is uncertain whether the paraprofessionals really do provide any additional needed services. They may simply be window dressing to make clients

feel that their criticisms of the aloofness and inadequacies of the human service system are being met. Several societal changes during the sixties had serious implications for human service agencies. Urban unrest, race riots, and increasing crime rates in the inner city occurred in conjunction with the rise of minority group movements, many of which were persistent in their demands on the agencies for respect, recognition, and power. Differences in speech and manners between racial groups were accentuated with pride. The agencies were challenged to come into the neighborhoods—to open branches, outposts, and neighborhood centers. At the time when the need for social services in the inner city increased, many agencies began to doubt their ability to offer these services and have them accepted, especially in the face of mounting criticism from the residents of the areas served. Many professionals also became unwilling to enter areas where they felt unwelcome. In an effort to promote understanding and rapport between agencies and area residents, clients and the poor were included on the boards of trustees, the planning committees, and the staff of the agencies.

Confronted with client demands for more and different services and the client's demonstrated power, human service agencies were offered a remedy by the federal government in the form of New Careers. The clients' demands which required additional funds and manpower could be met through New Careers programs. The disadvantaged would be recruited and trained to meet client demands—and their salaries would be paid by grants from the federal treasury.

There have been accusations that recruitment was quite selective and that only the most vocally critical, who were also often the most capable and least unemployable, were being chosen for the New Careers program; they were thus being "co-opted" by the system. Goldberg refers to this practice as "creaming" the poor and as defeating the most basic purposes of New Careers (Goldberg, 1969:16-17, also see Berman, Haug and Sussman, 1971). Thus, the people selected may be those least likely to remain indigent to their clients' milieu, least aware of the problems of the hard-core poor, and most critical and rejecting of the people still in a situation from which they themselves have escaped. Furthermore, the agencies themselves may not have been expecting much in the way of service from the paraprofessionals other than to be on display as the "in-house" representative of the poor.

The directors of a group of rehabilitation and social agencies will give their perceptions and experiences in dealing with these issues in the following pages.

## II. THE STUDY FOCUS AND METHODS

The major purpose of this study is to examine the utilization of paraprofessionals in human service systems. While there has been considerable research on the use of paraprofessionals in education, health and social service (e.g., Gartner, 1971; Grosser, Henry and Kelley, 1969) the use of these workers in rehabilitation has been less systematically analyzed.

Taylor (1971) has summarized nine projects which utilized New Careers while Peth (1971) reviews the role of the nonprofessional in rehabilitation. Some studies have focused on issues relating to and attitudes toward using paraprofessionals in rehabilitation (Hudson, 1972; Taylor, 1972; Jaques, 1972). Still others have surveyed the roles of the workers from the perspective of professionals in various fields, such as physical therapy (Senters, 1972) and mental retardation (Smiley, 1973). Remmes (1972) discusses the impact of consumer organizations of disabled persons on rehabilitation. These studies do not, however, probe problems and consequences of paraprofessional employment across rehabilitation disciplines nor do they compare the use of New Careerists in rehabilitation agencies to their use in social service institutions.

In the study reported here, comparative data have been obtained in both rehabilitation and social service settings on agency needs and utilization of paraprofessionals. These data, obtained through interviews with agency directors, should provide an empirical assessment of organizational behavior in implementing the New Careers model.

### Research Questions

The basic research questions explored in the following pages are:

1. To what extent are human service agencies suffering from a manpower shortage?
  - a. If a shortage exists, are funds available for hiring new workers?
  - b. If funds are available, are paraprofessionals being hired?
2. Which agencies use paraprofessional workers?
  - a. How are the paraprofessionals used in the agencies?
  - b. What do directors see as the advantages and disadvantages of using paraprofessionals in their agencies?
3. Whether or not an agency is presently using paraprofessionals, does the agency director see the New Careers movement as a useful development?

### Methodology

The assumption was made that rehabilitation and social service agencies in the urban area studied are reasonably similar to those found in most metropolitan American cities. The study respondents constitute a purposive sample: the heads of 46 public and private rehabilitation and social service agencies. This array included all agencies which met the study definition of an independent entity, listed in a health and welfare directory available in the study city and in the Social and Rehabilitation Service agency roster.

Rehabilitation agencies are defined as organizations whose primary purpose is to provide psychological, physical and/or vocational rehabilitation for clients. Social service agencies include those agencies whose primary purpose is to provide casework or counseling services to individuals, groups or to both.

Given the breadth of agency information sought and a thorough knowledge of the agencies' structure and functions in the past several years, it was decided to interview the agency directors. The survey list originally included 28 rehabilitation and 18 social service agencies; because of inability to schedule appointments with agency heads, there were six agencies from which information could not be obtained, including one refusal. The final study group, therefore, included 23 rehabilitation and 17 social service agency directors for a response rate of 87 percent.

In deciding to interview the agency directors it was assumed that job turnover among top administrative staff would be low so that the directors would be able to provide a historical perspective on the agency's involvement with paraprofessionals. This assumption, for the most part, was merited since three quarters of the rehabilitation and nearly nine out of ten of the social service directors had been with their agencies for three or more years. (Table 1).

**Table 1.—Length of Time Rehabilitation and Social Service Agency Directors Have Been with Their Agencies**

Length of Time Director Has Been With the Agency	Rehabilitation Agencies	Social Service Agencies
	%	%
Under 3 years	(23) <sup>a</sup>	(13)
3 but less than 10 years	(54)	(40)
10 years or more	<u>(23)</u>	<u>(47)</u>
Total %	100	100
N	22	15

a. In this and all succeeding tables percentages are in parentheses to remind the reader that they are based on small N's and are therefore likely to be unstable. Percentages are used for descriptive purposes but should be interpreted with caution.

It was also felt that the centrality of the position of agency director would give him an overview of staffing needs and the use of paraprofessional workers. This assumption was correct for the smaller agencies. However, the larger the agency, the more distant the director was from immediate contacts with his staff members. In particular in the larger agencies the lower echelon staff, i.e., the paraprofessionals, had little or no direct contact with the chief administrator. Therefore, information on professional/paraprofessional relationships and client reactions to paraprofessionals are the *directors' opinions* concerning these matters; these may or may not be substantiated by the professionals,

paraprofessionals,<sup>2</sup> or clients themselves. The directors' thoughts on these matters are nevertheless important because of the critical role they play in formulating and implementing agency policies. Thus, this report is chiefly concerned with the administrative perspective on the utilization of paraprofessionals.

Pretest interviews were conducted with agency directors in a number of rehabilitation and social service agencies in order to sensitize the interviewers to organizational problems in paraprofessional utilization. The study data were gathered through structured interviews containing approximately 70 multi-part items. The first half of the interview covered questions regarding the agency's structure and functioning and the second, the utilization or nonutilization of paraprofessionals. A number of the questions were open-ended in order to allow for variation in knowledge, attitudes and opinions; because of this, the interviews ranged in length from one to five hours. In addition to the interview data, each agency director was asked for relevant literature on the agency's history, services and job descriptions and publications by its staff, particularly in the area of manpower and manpower problems, as a guide to interpretation of the interview data. The interviews were conducted from August through November of 1971 and, wherever possible, were tape recorded.<sup>3</sup>

### The Study Variables

The analysis will involve the comparison of the rehabilitation agencies in the sample with the social service agencies on nine sets of variables that reflect the major research questions raised above. The variables, their empirical indicators, and the rationales for their use are listed below:

1. **Manpower:** indicators of a possible manpower shortage are included because manpower needs are likely to influence both the necessity and the feasibility of adding paraprofessionals to agency staff.
  - a. **Size of staff:** the number of full and part-time personnel; whether the agency uses volunteers and if so, how many. The size of the present staff is an important consideration in determining the need for hiring new personnel.
  - b. **Turnover:** the number of staff vacancies which occur during a year. Agencies which experience a high turnover rate caused by structural problems such as high caseloads, low pay, little chance for advancement, are, according to Elston, prime candidates for New Careers programs (Elston, 1968:66-67).
  - c. **Staff expansion:** the addition of new staff positions during the last three years. This is an indicator of increasing demands on agencies for expanded and/or additional services. It is not, however, simply

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<sup>2</sup>As another aspect of the Careers Project, a study is planned to focus on the perspectives of newly hired professionals and paraprofessionals.

<sup>3</sup>In some early interviews, attempts were made to record respondents' replies virtually verbatim but this interfered with rapport. After tape recording was instituted, only two respondents preferred not to have the interview taped.

- staff expansion but rather the kind of staff expansion which is important. At what level—professional, paraprofessional, or non-professional—are new workers being hired?
- d. **Shortages:** the number of unfilled positions, the number of additional personnel needed; cutbacks in personnel. The amount of money an agency is allocated is an important influence on its ability to provide services and to develop programs such as New Careers
2. **Funding:** the indicators of funding are:
    - a. **Funding as a resource:** the agency's yearly budget, the source of funds, and the time basis for funding.
    - b. **Priorities for additional funding:** what agency directors' priorities would be if they were given additional funds.
  3. **Interorganizational Linkages:** the extent to which an agency exchanges information and services with other agencies. Such interagency linkages may encourage the development of programs like New Careers as a result of the exchange of new information, or agencies may use the referral network as an alternative to the addition of paraprofessionals to the staff.
    - a. **Agency linkages:** the number and type of agencies to which an agency relates.
    - b. **Type of functions shared:** does the agency share information, staff or services with other agencies? Agencies which cooperate with other organizations in the use of staff members or in providing services rather than simply in exchange of information would probably be less likely to develop New Careers programs.
  4. **Recruitment:** how the agency locates new staff members for hiring.
    - a. **Sources of recruitment:** when staff openings occur, does the agency use educational institutions, professional organizations, advertisements in the media, or files of applicants to fill them? If agencies recruit through universities or professional organizations, they will probably be less likely to hire paraprofessional workers.
    - b. **Recruitment restrictions:** the extent to which and the reasons why agencies give preference to recruits from various majority and minority groups. Agencies which give greater opportunities to minority groups or who selectively recruit minority group members in order to improve services to clients will be more likely to hire New Careerists.
  5. **Hiring Practices:** the requirements, such as formal education or prior work experience, which agencies set in hiring new employees. The use of such formal criteria decreases the likelihood that agencies would consider hiring the disadvantaged as paraprofessionals.
  6. **Community Linkages:** the extent to which the agency is linked to the community and the clients it serves.
    - a. **Attitudes of the clients and community:** to what extent is the agency director aware of favorable or unfavorable client or community attitudes toward the agency and its workers? According to the New Careers ideology, agencies which use indigenous workers should be viewed more favorably by the community and the clients.

- b. **Use of paraprofessionals:** if any agency employs paraprofessionals, to what extent are they used as information sources about community and client attitudes.
- c. **Agency methods of community contact:** how does the agency attempt to maintain contact with the community and the clients it serves—through the media, home visits, feedback from indigenous employees, or other methods?
- 7. **The Client Population:** what are the characteristics of the client population?
  - a. **Definitions of the client population:** according to the New Careers model, if an agency describes the client population in terms of race or poverty, it is likely to be predisposed towards employing paraprofessionals.
  - b. **Changes in the client population:** increases or decreases in numbers of minority or poverty group members served by the agency. If an agency reports increases in minority or poverty clientele, it may be more likely to hire paraprofessionals.
- 8. **Adequacy of Services:** indicators of the director's perception of the adequacy of services include requests by clients for additional programs, and clients complaints regarding the kinds of services and the manner in which they are offered.
- 9. **Use of Paraprofessionals:** definitions and sources of information on New Careers; perceived advantages and disadvantages of paraprofessional employment; congruence of employment practices and the New Careers model; staff problems.

### III. AGENCY PROFILE

The problems, dilemmas and successes of paraprofessionals in human services agencies can best be understood in the context of the characteristics of these organizations. Various aspects of the structure of social welfare and rehabilitation agencies are considered in detail in this section.

#### Staff Size

Over two-thirds of the 23 rehabilitation agencies are public compared to two of the 17 in the social service field. The majority of both types of agencies have fewer than 60 people on their staffs (Table 2). In fact, approximately two-fifths of the rehabilitation and a third of the social service agencies have fewer than 20 full-time employees. Only a tenth of the rehabilitation and a quarter of the social service agencies have staffs of 200 or more.



**Table 2 — Available Personnel in Rehabilitation and Social Service Agencies and Number of Clients Served**

<b>Number of Personnel and Clients</b>	<b>Rehabilitation Agencies</b>	<b>Social Service Agencies</b>
<b>Number of Full-time Personnel</b>	%	%
Less than 20	(41)	(35)
20 to 60	(31)	(35)
61 to 199	(18)	(6)
200 or more	(10)	(24)
Total %	100	100
N	22 <sup>a</sup>	17
<b>Number of Part-time Personnel</b>		
None	(61)	(6)
1 to 5	(17)	(55)
6 to 10	(9)	(11)
11 or more	(13)	(28)
Total %	100	100
N	19	15
<b>Number of Volunteers</b>		
None	(68)	(20)
1 to 20	(22)	(60)
Over 20	(10)	(20)
Total %	100	100
N	19	15
<b>Number of Clients Served</b>		
Under 100	(5)	(6)
100 to 299	(9)	(17)
300 to 599	(22)	(22)
600 to 999	(5)	(11)
1000 or over	(59)	(44)
Total %	100	100
N	22	17

a. In these and succeeding tables, N's below 23 and 17 are due to not-ascertained data.

Rehabilitation settings are far less likely to employ part-time employees than are the social service agencies. Only two-fifths in rehabilitation as compared to almost all in social service use such workers. This difference may in part be a result of the fact that over two-thirds of the rehabilitation agencies are public which requires them to hire according to civil service regulations. A number of the directors did state that they were prohibited from hiring part-time help by civil service rules.

Also, rehabilitation agencies differ markedly from social service in the use of volunteers: only a third utilize such help as against four-fifths of the social service agencies. Volunteers are not a substitute for the hiring of paraprofessionals however. According to data not reported here, there is no difference in the rate of paraprofessional employment between agencies which have a volunteer component and those who do not.

These combinations of full-time, part-time and volunteer staff handle a sizeable case load. Approximately three-fifths of the rehabilitation and two-fifths of the social service agencies report serving 1,000 or more clients a year.

#### **Manpower Trends**

Approximately two in ten of the rehabilitation agencies in the sample report no turnover in an average year compared to a quarter of the social service agencies (Table 3). Among those which do experience staff replacements, more than two-thirds report replacing fewer than five staff members in an average year period. Thus, the staffs of both rehabilitation and social service agencies appear to be fairly stable over time. These findings suggest that there are relatively few openings for New Careerists in these agencies.

The reasons which the directors most commonly cite for turnover are personal factors, not necessarily connected with the agency job itself, such as marriage, childbirth, return to school, better opportunities elsewhere; these factors are mentioned by nine out of ten respondents in both rehabilitation and social service. In addition, the agency directors attribute half of the turnover in rehabilitation and a quarter in social service to structural problems on the job, such as high caseloads, low pay, little chance for promotion, and insufficient opportunity to use professional skills. The fact that directors are aware of such explanations for leaving suggests that an even higher proportion of workers may have left for these reasons, as workers may not always tell the director why they are resigning. The slightly higher rates of job turnover in rehabilitation agencies, many of which are public, and the greater frequency of structural and staff problems in these settings may reflect the pressures of working in public agencies and the difficulty of dealing with disabled, often stigmatized, patients. Finally, during 1971, rehabilitation funding seemed in jeopardy, as the state legislature battled over the budget; also the state did not distribute funds which were allocated. Staff resignations may have resulted.

The responses listed under "other" for the rehabilitation agencies are revealing. The three agencies included in this category are all public agencies. All three attributed their turnover to factors that could be interpreted as structural in nature. For example, one agency director replied that "a lack of

Table 3. — Turnover in Rehabilitation and Social Service Agencies

Agency Turnover and Reasons	Rehabilitation Agencies	Social Service Agencies
Average Number of Replacements in One Year	%	%
None	(19)	(27)
Under 5 replacements	(52)	(53)
5 to 20 replacements	(19)	(7)
Over 20 replacements	(10)	(13)
Total %	100	100
N	21	15
<b>Reasons Cited by Agency Directors for Turnover</b>		
Outside Factors (non-job related or personal)	(91)	(88)
Structural Factors (low pay, no promotions)	(48)	(24)
Staff Problems (disharmony, tensions)	(25)	(12)
Dismissal (poor performance)	(14)	(12)
Other	(14)	(12)
Total %	*	*
N	21	15

\* Total exceeds 100% because directors cited more than one reason for turnover.

cooperation from the federal government" accounted for turnover, although "a lack of motivation among staff" was also mentioned. A second answered "the employee's inability to adjust to the bureaucracy within which he must work and an unwillingness to work in such a setting" resulted in turnover among staff. The director of the third rehabilitation agency attributed turnover among his physicians to their leaving to go into private practice where the financial gains are much greater. Only three of the rehabilitation and two of the social service agencies reported job turnover because staff members were fired for poor performance; this suggests either that human service agencies are reluctant to fire employees, or that 35 out of the 40 settings studied had high caliber workers, having made no hiring errors.

### Staff Expansion

During the past three years 13 of 22 rehabilitation and nine of the 17 social service agencies have expanded their staffs by adding new positions. In both types of agencies professionals were most likely to be hired, at about twice the rate that paraprofessionals were added. The reasons for staff expansion vary somewhat by agency type. Rehabilitation agencies were more likely to state that new personnel were added as a result of a general reorganization. Over two-thirds of the rehabilitation agencies studied are public; in 1970 most of these were reorganized into units containing rehabilitation teams. This is reflected in the rehabilitation agency responses. "change in structure," "funds became available," "allocated the position by Civil Service." On the other hand, social service agencies were more likely to mention "a change in goals or services" or "to better serve clients" as the reasons underlying staff expansion. Other responses stressed the need to become involved in community organization and outreach work although in only three instances were specific requests *by clients* for such services mentioned. Directors in both types of agencies related staff expansion to working more closely with clients in their community and offering more "tangible" services. These responses reflect agency philosophy to help the client learn to cope more successfully with his own environment. This is characteristic of agencies offering services to the aged client where the primary goal is to keep the person living independently in the community. In several of these agencies, paraprofessionals, in the form of Geriatric Outreach Workers, were used to give "concrete" help to the aged in shopping, banking, or clinic visits. (For another discussion of the use of geriatric outreach workers, see Breslau and Haug, 1972).

One private rehabilitation agency director gave the following account of why his agency expanded its staff to include paraprofessionals:

They were hired as part of an effort made by the agency to begin training nonprofessionals to take over some of the aspects of the treatment process. The reason for this is the unavailability of professionals and the high salaries professionals demand. Only the professionals, however, are competent to handle the more difficult cases and to evaluate and diagnose the client.

### Manpower Shortages

As for manpower shortages, nine-tenths of both rehabilitation agencies and social service agencies reported having only three or fewer unfilled positions on their staffs. Rehabilitation agencies were more likely to mention having nonprofessional and clerical slots unfilled while social service agencies were more likely to have unfilled professional positions. In both types of agencies the most common reason was "insufficient funds," followed by "applicants who were not qualified." Other reasons mentioned by the rehabilitation directors as accounting for the unfilled positions were problems in funding and contract negotiation, changes in services, location of the agency and low salaries. Given the emphasis in the New Careers movement on hiring indigenous, presumably unskilled workers, the frequency of the reply "applicants not qualified" is particularly interesting.

"Unfilled positions" are those for which funds are already budgeted, but manpower *needs* may exceed the number of these available job slots. Thus, when agency directors were asked if they presently had enough staff, only half the rehabilitation and a sixth of the social service agency directors replied in the affirmative (Table 4).

**Table 4 — Number of and Preference for Additional Personnel Needed by Rehabilitation and Social Service Agencies**

Added Personnel	Rehabilitation Agencies	Social Service Agencies
<b>Number of Additional Personnel Needed</b>	%	%
None needed	(48)	(17)
Under 5	(24)	(17)
5 to 10	(9)	(30)
11 to 20	(5)	(0)
20 or more	(10)	(24)
Additions needed, but no number specified	(5)	(12)
Total %	101	100
N	21	17
<b>First and Second Preferences for Additional Personnel</b>		
No particular preference	(43)	(23)
Professional	(47)	(71)
Paraprofessional	(5)	(0)
Nonprofessional	(5)	(6)
Total %	100	100
N	21	17
No second choice indicated	(67)	(41)
Professional	(23)	(23)
Paraprofessional	(5)	(29)
Nonprofessional	(5)	(6)
Total %	100	99
N	21	17

Social service agency directors require greater numbers of additional personnel than do those in rehabilitation. Less than a third of the rehabilitation agencies reported a need for five or more additional staff compared to over half of the social service agencies. The social service agency directors are more likely than the rehabilitation directors to feel that they need the more highly skilled

professional workers as a first priority, nearly three-quarters indicated this as compared to less than one-half of those in rehabilitation. About a third of the social service agency heads, however, did express a desire to add paraprofessional workers, chiefly as a second choice. On the other hand, only one rehabilitation chief had an interest in hiring paraprofessionals, either as a first or second priority.

The most frequent reason directors in both types of agencies cited for not hiring additional needed personnel was the lack of funds to do so. Approximately half of the directors in both kinds of agencies indicate that they have not been able to hire new staff and have also had to cutback on personnel because of limited funds. As far as unfilled but funded positions are concerned, social service agencies mentioned that applicants for these positions were not appropriately qualified. It is possible that the struggle for professional status among social workers has made the directors of these agencies particularly aware of the importance of educational qualifications for staff members.

In short, although both rehabilitation and social service agencies report manpower shortages, social service agencies do so with greater frequency. Both types of agency show a preference for hiring more professional, rather than paraprofessional staff, the tendency being stronger among directors of social service agencies. This suggests that while the agency directors interviewed may be aware of the New Careers movement, they are reluctant to employ paraprofessionals in an effort to ease any manpower shortages that exist.

### **Funding**

Table 5 shows comparable distributions of yearly budgets for both types of agencies. About a third operate on a million dollars a year or more, and most others are budgeted for less than half a million. Social service agencies are somewhat more likely to be on a yearly funding basis than are rehabilitation agencies which may be on multiple year or other forms of funding. Since a majority of the rehabilitation agencies in the sample are public while the majority of social service agencies are private, it is understandable that more of the formers' budgets come from federal, state and local funds. In contrast, the social service agencies are more dependent on campaigns, foundations, and fees for service.

If additional funds were available, the top priority for both types of agency would be hiring additional staff or expanding existing programs which would also require the hiring of additional staff. Social service agency directors are twice as likely as rehabilitation agency heads to want to initiate new programs if given additional funds.

### **Interorganizational Linkages**

An agency faced with increased demand for existing services or for additional services may use linkages with other agencies as an alternative to staff expansion. Table 6 indicates that social service are less likely than rehabilitation agencies to report relationships with other organizations.

**Table 5. — Amount of Yearly Budget and First Priority for Allocating Additional Funds for Rehabilitation and Social Service Agencies**

Yearly Budget and Fund Priorities	Rehabilitation Agencies	Social Service Agencies
<b>Amount of Yearly Budget (in thousands)</b>	%	%
\$50 to 199	(26)	(13)
200 to 499	(32)	(31)
500 to 999	(5)	(25)
1,000 to 1,999	(5)	(0)
2,000 to 3,999	(11)	(25)
4,000 or over	(21)	(6)
Total %	100	100
N	19	16
 <b>First Priority for Additional Allocation</b>		
Hire additional staff and expand existing programs	(52)	(52)
Improve current programs	(14)	(6)
Begin new programs	(14)	(30)
Increase staff salaries	(10)	(12)
Other	(10)	(0)
Total %	100	100
N	21	17

But where patterns of cooperation exist, they are quite similar. The agencies assist each other by sharing client services, referring clients, in program implementation, and the use of staff. Not surprisingly, the area in which agencies are least likely to share resources is funding.

The directors indicated that rehabilitation agencies are more frequently linked with other rehabilitation agencies; government divisions such as the Department of Labor and the Department of Agriculture; employment agencies; and Legal Aid. In contrast, the social service organizations are more often linked with other social service agencies, law enforcement agencies, and religious organizations. Both types of agencies report ties with educational, medical, mental health, welfare, and community organizations.

#### **Recruitment Preferences**

More than half of the directors state that they give no preference to any group in recruiting new staff members. Although many rehabilitation agencies are primarily funded by tax dollars and are required to be equal opportunity employers, they are permitted to make particular efforts to recruit from among

**Table 6. — Interorganizational Linkages and Type of Cooperation with Other Agencies for Rehabilitation and Social Service Agencies**

Linkages and Cooperation	Rehabilitation Agencies	Social Service Agencies
<b>Number of Linkages</b>	%	%
None or indeterminate	(14)	(35)
1 to 3	(59)	(41)
4 to 6	(14)	(12)
7 or more	<u>(14)</u>	<u>(12)</u>
Total %	101	100
N	22	17
<b>Type of Cooperation</b>		
Client services	(96)	(94)
Client referrals	(86)	(88)
Use of staff	(62)	(63)
Funds	(32)	(31)
Programs	(77)	(81)
Planning	<u>(71)</u>	<u>(69)</u>
Total %	*	*
N	22	17

\*Total percent is more than 100 because of multiple responses.

the disadvantaged or other special groups. In fact, directors in each setting indicated that they engaged in selective recruitment patterns consonant with the assumption of New Careers. Social service agencies more frequently recruit either residents of their target areas or blacks, while the rehabilitation agencies selectively recruit from a wider range of minority groups.

The most frequently cited reasons rehabilitation agency directors gave for selective recruitment were to establish better rapport, to give better service to clients, and to comply with contract requirements. This would suggest that while these agencies are presently seeking minority group employees, government policies have provided the impetus. Social service agencies show no unanimity of reasons for preference. One social service agency director indicated that the blind and middle-aged were recruited because they were less likely to resign. Another stated that whites were recruited because of pressures from his board of trustees.

A significant portion of both types of agencies are concerned with the employment of minority group members and selectively recruit them in order to strengthen the bonds between agency and client. This finding lends support to one of the basic assumptions of the New Careers model; that is, some human



service agencies are trying to become more responsive to their client populations and one of the mechanisms they use in doing so is to hire the indigenous worker. It is, however, perhaps equally significant that six out of ten of each type of agency failed to evidence any particular concern with minority hiring.

### Hiring Practices

The most commonly used criterion for hiring an individual in both types of agencies is schooling completed prior to employment. It was cited as a factor in hiring by 18 of the 23 rehabilitation agencies and all 17 of the social service agencies. When the directors of agencies utilizing paraprofessionals were specifically asked what criteria guided them in hiring these workers, approximately two-thirds of both rehabilitation and social service agencies again mentioned educational attainment.

This reliance on prior education as a basis for hiring is at odds with the New Careers model which stresses the necessity of abandoning formalistic criteria. Such a focus seems effectively to screen out those individuals who would most benefit from New Careers programs. Secondly, this practice subverts one of the important purposes of New Careers which is to provide a viable alternative for the development of skills and career upgrading to individuals who have failed in traditional career routes.

If agencies are relying on prior educational attainment as a basis for hiring paraprofessional workers, then they are indeed "creaming" the poor (Goldberg, 1969:16-17). Presumably only those individuals who offer signs of potential success through their adjustment to the formal education system are selected for participation in the programs. Selective recruitment practices may maximize the "success" of the program in terms of completion rates and employment, but, in the long run, they defeat the purpose of New Careers.

Additional criteria used in hiring mentioned by half or more of the agencies were: work experience, interviews, references, and personality. A number of directors pointed out the difficulty of detecting a potential for empathy, warmth, or concern for people in potential employees; it is these characteristics which are felt to be essential for effective human service workers. This highlights a central problem: it is difficult, if not impossible, to delineate clearly the requisites for an effective human service worker let alone to develop empirical indicators of these qualities. In the absence of such indicators, directors come to rely on certain presumably important characteristics such as prior educational attainment—or on intuitive evaluations derived from the employment interview. This may adversely affect the aims of the New Careers movement.

### Community Linkages

The majority of the agency directors, three-quarters of those in rehabilitation and nine out of ten of those in social service, feel that clients are favorably disposed toward their agencies. Both sets of directors generally attribute favorable attitudes to the fact that they give "successful services." In rehabilitation one reason given for *unfavorable* attitudes toward the agencies is dissatisfaction of clients who did not obtain the jobs they wanted or failed to be admitted to specific vocational programs of interest to them.

While the attitudes of the larger community toward the agencies vary, the directors feel that they are for the most part favorable. Among the reasons cited for these attitudes is the fact that the agencies serve a large number of clients and provide special services. The religiously affiliated agencies indicated that community members appreciated being served by an agency of "their own kind." Two other agencies felt they were not only respected by the local community but that they also received national recognition for their work.

None of the agencies attributed the favorable attitudes of the clients or community to the use of indigenous workers and only one felt that it was the result of being located in the neighborhood being served. Since the majority of agencies employ paraprofessionals, it would appear that the agency directors do not make a connection between their utilization and the presence of favorable client/community attitudes, although in some cases paraprofessionals had already been employed for three years, and even longer in some social welfare agencies. It may take a relatively long time for the impact of the use of paraprofessionals to become apparent in improved community-agency relations.

Among those agencies which reported negative attitudes, three indicated they felt that people misunderstood or had negative views about the problem with which the agency was involved, such as mental illness or retardation, or else did not understand the service provided. Four social service and one rehabilitation agency reported antagonistic feelings on the part of specific groups within the community. For example, it was believed the aged regarded one agency as being too youth-oriented; blacks saw another as too much a white agency; and the poor felt service at certain private agencies was not for them. Two agency directors, both in private social service, thought other agencies regarded them as "ivory tower," or "rich," envying their large operating budgets and endowments.

About a quarter of the agencies use letters, phone calls, or visits from clients or community members to obtain information about community attitudes. Another third rely on staff or board members or a specially designated staff member, such as a public relations expert, to keep them informed concerning client/community feeling. Many of the social service agencies use a more down-to-earth indicator of community attitudes—financial contributions. When contributions decline, the directors feel that the community is viewing them unfavorably; they gauge public sentiment in terms of fees, donations, grants, and endowments. Since the public welfare agencies are dependent on tax dollars, they use the passage of health and welfare levies as indicators of public approval. This is a self-evaluation using a perceived cost/benefit model. Several agencies also indicated that they view the number of referrals made to their agency, surveys of client attitudes and requests to take students for field placements as indicators of support by the community and clients.

These responses suggest that the directors use a variety of generally indirect techniques for assessing attitudes toward their agencies. They appear, in many cases, to be at least as concerned with the attitudes of the *general* population as they are with the attitudes of the specific subcommunities from which their

clients are drawn. Given the financial dependence of the agencies on "public good will" this is not unexpected. However, it indicates that directors are not primarily concerned with client attitudes. While they may hire New Careerists, the action is not perceived as a response to client criticism. The implication is that if public opposition to the New Careers movement were to develop, agencies, particularly private ones dependent on donations, would consider dropping the program. A major organizational imperative is survival. Agencies view their goals and functions holistically, and will not allow a segment of a program to take precedence over the totality. Rather than prejudicing the general position of the agency, programs found to be offensive to important publics, even if congenial to some clients, would be dropped.

An additional concern for the agencies is providing information about their services to potential clients and developing rapport with those already being served. The social service agencies report more activities with respect to these problems than do the rehabilitation agencies. As aids in developing rapport, they are somewhat more likely to use devices such as leaflets or letters, home visits, staff members who have similar backgrounds to the clients or who are indigenous to the service area, and contacts with neighborhood leaders. Several factors may account for these findings. First, social service agencies may have more of a problem establishing rapport with clients; indeed, the services rendered by such agencies may be more dependent on establishing rapport than are the relatively specific benefits offered by the rehabilitation agencies. Second, the ideology of social service organizations, more so than that in rehabilitation, focuses on problems of interpersonal relations with clients; the staff is thus likely to favor activities designed to develop closer rapport.

Third, the majority of the social service agencies are private and are often in competition with one another. They must seek out and attract clients whereas the rehabilitation agencies, many of which are public, have a "captive" clientele. People who want rehabilitation benefits of training, stipends, corrective aids, and job finding have little choice between agencies. Public institutions have a virtual monopoly of these services as well as legal constraints on eligibility. The consequence is less of a need to be responsive to client demands than exists in private social service.

#### **The Client Population**

When asked to describe their client populations, the agency directors spontaneously tend to do so in terms of disability, race, age, and sex. The rehabilitation agencies are likely to view their clients as poor, physically disabled (including the blind and the retarded), and emotionally disturbed (Table 7). It is interesting to note that both the rehabilitation and social service agencies modally define their clients' disability in terms of economic deprivation, symbolic of the dominant economic rationale so fashionable in current rehabilitation legislation. When age is mentioned as a distinguishing characteristic, the rehabilitation directors are more likely to state that the clients are equally distributed throughout the age range or else that the largest portion are in the 18 to 30 age bracket. The social service directors, if they conceptualize clients in terms of age at all, are apt to refer to them as children or adolescents.

Table 7. — Descriptive Characteristics Used by Agency Directors to Describe Their Clients

Client Characteristics	Rehabilitation Agencies	Social Service Agencies
	%	%
<b>Disability</b>		
Not mentioned	(9)	(35)
Physically disabled	(14)	(12)
Retarded	(14)	(6)
Blind	(5)	(0)
Economically deprived	(41)	(35)
Emotionally disturbed	(18)	(12)
Total %	101	100
N	22	17
<b>Race</b>		
Not mentioned	(36)	(22)
Over 50 percent black	(41)	(28)
Over 50 percent white	(14)	(44)
Equally distributed	(9)	(0)
Other	(0)	(6)
Total %	100	100
N	22	17
<b>Race</b>		
Not mentioned	(36)	(22)
Over 50 percent black	(41)	(28)
Over 50 percent white	(14)	(44)
Equally distributed	(9)	(0)
Other	(0)	(6)
Total %	100	100
N	22	17
<b>Age</b>		
Not mentioned	(36)	(65)
0 - 17 years	(0)	(17)
18 - 30 years	(27)	(6)
31 - 50 years	(0)	(0)
Over 50	(9)	(6)
Equally distributed	(27)	(6)
Total %	99	100
N	22	17

Although the social service directors, more frequently than those in rehabilitation, note race as a client characteristic, they also describe their clients as over 50 percent white while the rehabilitation directors tend to visualize their client population as over 50 percent black. Sex is rarely mentioned as a salient

characteristic. When it is, the clients in rehabilitation are about equally likely to be described as female or male; on the other hand, those in social service more often perceive their clientele as female.

On the grounds that agency directors when asked to describe their clientele will respond in terms of those client characteristics which they see as salient to agency operation, it can be said that disability and race dominate images of the client. Age and sex are less critical variables in defining the population to be served.

### **Changes in the Client Population**

Half of the directors report a change in the composition of their client population in the past few years. Typically, they see the clientele as becoming younger, more heterogeneous, and from higher social strata than previously. In addition, the rehabilitation agencies report they are treating more males and clients who are emotionally disturbed; the latter results from the recent involvement of some of the agencies with mental institutions. A number of the rehabilitation agencies report that increasing numbers of lower middle and middle class clients are turning to them for help in obtaining employment, whereas before inflation and the nation's recent economic slowdown, unemployment was a problem more exclusive to inner city poor and blacks as a consequence of their low level skills and limited education. The rehabilitation agencies regard the source of these new clients' problems and their solutions as different from before. Unemployment is viewed as a "system" problem; attempts to train these clients, many of whom already have a skill, in new proficiencies are, therefore, felt to be futile. One director stated that the best help his agency could offer in these circumstances is training in budgeting and money management until the economy improves.

The implications these changes in the client population have for the New Careers movement are uncertain. If the agencies, given their limited funds, focus on providing services for the increasing numbers of individuals who are seeking help, this would predict the increased use of paraprofessionals. However, if the trend toward higher status clients continues, this may act as an inhibiting factor on the expansion of New Careers employment; there will be less need to train the poor to serve the poor. White lower and middle class clients may create a demand for even more professional, rather than paraprofessional staff. Since any worker prefers successful outcomes for his labors, social workers and rehabilitation staff tend to select as clients those who show the most promise instead of the more difficult cases. Consequently, human service agencies may direct their attention and effort to the new white middle class clients, thus minimizing the need for indigenous paraprofessionals who are poor and members of minority groups.

### **Service Patterns**

Approximately half the rehabilitation directors indicated that clients find the vocational services the most helpful, while a quarter mentioned the counseling services. Among the social service agency heads, a third mentioned homemaker day care services, followed by a quarter who felt the counseling services were most appreciated.

Two-thirds of the rehabilitation and nine out of ten of the social service administrators indicated that clients had asked for additional kinds of services from their agencies (Table 8). The most common requests in social service settings were for more homemaker or day care services followed by goods such as money, clothing, furniture, appliances, and housing. The rehabilitation agency directors also indicated frequent client requests for goods followed by requests for additional vocational services such as job training and placement.

**Table 8. — Directors' Reports of Clients' First and Second Choices for Additional Services**

Additional Services Requested	Rehabilitation Agencies		Social Service Agencies	
	First Choice	Second Choice	First Choice	Second Choice
	%	%	%	%
None	(35)	(60)	(12)	(47)
Goods; money, clothing furniture, housing, etc.	(30)	(10)	(19)	(13)
Vocational; job training and placement	(15)	(10)	(6)	(7)
Day care/homemaker	(0)	(10)	(31)	(7)
Medical	(10)	(0)	(6)	(0)
Counseling	(0)	(5)	(6)	(7)
Other	(10)	(5)	(20)	(20)
Total %	100	100	100	101
N	20	20	17	15

According to the directors, the social service clients more often have complaints regarding both the manner and the kinds of services which are offered. The most common complaint against service delivery is that the clients have to wait too long, although there are also charges that service is not adequate. Nearly half of the social service directors mentioned long waits for service, compared to only one-sixth of the rehabilitation directors. Overall, the directors perceived that only about half or fewer of their clients were dissatisfied with the services offered. Given the fact that many of the directors' sources of information about clients and their needs are indirect, often filtered through other agency members and perhaps discounted along the way, actual rates of client dissatisfaction with service may actually be higher than those reported above.

### Summary of Agency Characteristics

In this section of the paper, the structure and functioning of 23 rehabilitation and 17 social service agencies in an urban area were examined to determine the influence such characteristics might have on the agencies' utilization of paraprofessional workers. The majority of the agencies studied report staffs of 60 or less. In addition to their small size, manpower turnover rates are low in the agencies—more than two-thirds of the agency directors reported replacing fewer than five staff members a year; this suggests there are few possible openings available for New Careerists.

According to the directors, workers leave most commonly because of personal issues, that is those not related to the job itself. However, almost half of the turnover in rehabilitation and a quarter in social service is attributed to structural problems on the job. The fact that directors are aware of these reasons for leaving with such frequency suggests that they may be even more common, as workers may not always inform the director of the cause for their departure. The data provide only limited support for one explanation offered for the manpower shortages in human services: turnover stemming from dissatisfaction with various aspects of the job.

While the agencies do report some needs for more manpower, the directors' general attitudes toward hiring workers and responding to clients demands for services suggest that they are not especially predisposed to considering paraprofessionals or more specifically New Careerists to fill these needs.

Over half of both the rehabilitation and social service agencies expanded their staffs in the past three years, but they were twice as likely to seek professional recruits as paraprofessionals. The primary cause of manpower shortages reported by the directors was inadequate funding; thus, if funds were available, agency heads would presumably be able to find workers to fill vacancies. On the other hand, some agencies had funds but indicated that they had unfilled positions because of unqualified applicants. This rationale is not congruent with one goal of the New Careers movement, that is to hire indigenous, untrained workers and train them on the job. If agencies are positive in their attitudes toward the New Careers movement, "qualifications" should not be a primary concern, as they appear to be in many of the agencies being studied.

One of the prime characteristics the directors mentioned in hiring new staff members of any kind was their educational background. In other words, their general hiring practices predispose them to think of other kinds of workers than paraprofessionals who are generally not highly trained before entering the human services. All of the agencies are troubled by budgetary restrictions. Public agencies including most of those in rehabilitation are dependent on the legislature and the passage of levies; the private agencies, the majority of which are engaged in social service, are dependent on donations and fund drives. The social service agencies, however, are more likely to feel that services to clients suffer because of money limitations.

Because of their dependence on public good will, administrators in both types of settings *seem to be more concerned about the attitudes of the general community towards their agencies than they are about their clients' attitudes.* This suggests that while clients do make demands for additional kinds of services from the agencies, the directors may not so much respond to these as to pressure from the general public. While directors are aware of the need for information about clients' concerns, they primarily use indirect methods of obtaining it. This means that their definitions of clients' needs and complaints are often filtered through staff members or other circuitous routes.

While approximately four out of ten directors in each setting indicated that they use selective recruitment practices which are in agreement with the assumptions of New Careers, hiring either residents of their target areas or blacks, it is perhaps even more significant that almost six out of ten gave little indication of active recruitment efforts among minority groups.

Another relevant development is that half of the directors report a change in the composition of their client populations to a more heterogeneous, younger group, higher in social status than those they had previously served. This too, creates uncertainties for New Careers employment; if one reason such workers were hired was to train the poor to work with the poor, should the client population continue to change, agencies might feel justified in reducing the use of this kind of paraprofessional, even though the need for their services had not diminished. In treating clients, agencies tend to move toward the middle class because with this clientele they are more likely to obtain a higher proportion of successfully closed cases. This trend is endemic to the human services and is not a function of idiosyncratic decision-making by agency directors.

In brief, while the agency directors do report manpower shortages, their general attitudes toward hiring workers and responding to client pressure for services suggest that they are not especially predisposed to the hiring of New Careerists, either to fill their staffing needs or to meet complaints voiced against their agencies. In the following section, the agency directors' attitudes toward and their agencies' experiences with paraprofessionals will be explored in greater detail.

#### **IV. AGENCY DIRECTORS AND NEW CAREERS**

The New Careers ideology emphasizes the following points concerning the use of disadvantaged workers in paraprofessional positions: they should be indigenous to the community which the agency serves; provide a "bridging" function between the agency and the community; lack academic credentials but receive on-the-job training; be offered opportunity for job advancement, or a career ladder; and improve the delivery of agency services. Twenty-eight directors, or about two-thirds in both rehabilitation and social service, indicated that their agencies use paraprofessional workers; yet the directors are neither particularly aware of the New Careers movement nor especially cognizant of these guidelines for the use of New Careerists as one type of paraprofessional worker.



## Definitions

In an attempt to determine how cognizant the rehabilitation and social service directors were of the paraprofessional movement in general and of New Careerists in particular, they were asked for their definitions of the term "paraprofessional." A fifth were unwilling to state what a paraprofessional is or what he does. When a definition was offered, the most frequently mentioned characteristic was the educational attainment of the worker. Four directors defined a paraprofessional as someone without a B.A. degree, while thirteen felt that a paraprofessional had a B.A. degree but lacked the "formal credentials" of professional training; these responses were about equally distributed between rehabilitation and social welfare agencies.

Three respondents were more aware of the New Careers model of paraprofessionalism; they indicated that a paraprofessional is someone whose ability and skill is unrelated to the academic degrees obtained. One respondent pointed out that the term "paraprofessional" does not mean untrained but a lack of *formal* credentials. Another stated,

I see them [paraprofessionals] as people who do not have any specific or specialized training in a particular field but who have potential and certain qualifications to function in their . . . . position[s]. It is a person who is receiving on-the-job training and whose skills are being refined in that particular position.

One rehabilitation administrator regarded the primary role of the paraprofessional as that of an "information source" for the agency about the community and its clients. None of these responses emphasizes the New Careers assumption of the need for someone within the agency who is able to aid the client.

As for the level of skill involved in paraprofessional work, six rehabilitation and one social service administrator believe that paraprofessionals possess some professional skills while two rehabilitation and one social service administrator believe that paraprofessionals have only low level skills. On-the-job training, a vital component of New Careers, was infrequently mentioned. A third of the social welfare directors considered this important, compared to only one of the rehabilitation heads.

Concerning their perceptions of the degree of autonomy and responsibility allocated to paraprofessionals, a third of the social agency heads indicated that a paraprofessional was someone who must be supervised, as against only two of the 23 rehabilitation directors. Four respondents, one in rehabilitation and three in social service, defined a paraprofessional as being unique to work in the human services.

In additional comments, five respondents expressed dissatisfaction with the term "paraprofessional" on the grounds that it was either meaningless or degrading; one referred to the word as "a new package for an old commodity." He felt that the change in the job title to "paraprofessional" reflected an attempt to give the worker higher status—"paraprofessional is a 'society' word."

Another respondent objected to the use of the word "paraprofessional" in referring to a status or position. Since this director felt the term referred to a dimension of individual role behavior, he suggested that "paraprofessional" should be used to indicate the presence or absence of a complex of abilities which may be a part of any role. "Professional" should be used to describe the degree of skill, empathy, and dedication that the role incumbent displays in his performance—"paraprofessionals are often 'professional' about their work, while professionals may be 'para'—not fully trained, dedicated, empathetic."

According to these data, four-fifths of the directors studied have some awareness of the meaning of the term "paraprofessional." There is, however, little agreement among them about the components of this definition. Some mention educational qualifications; others, the role or type of work required of the worker. While the directors are aware of paraprofessionals in general, the notion of New Careers is less salient to them. These findings corroborate those on manpower shortages which indicate the importance directors place on prior educational qualifications in hiring new workers. This requirement is, of course, at odds with the New Careers model.

The administrators were asked how they had learned about the paraprofessional movement. Half had acquired information from publications of various kinds. The second most frequently cited source was contact with agencies which utilize paraprofessionals. A third was the government via literature or a government representative. In addition, some respondents learned about these workers from their attendance at conferences, membership in professional organizations, and work on various community committees.

The respondents were asked about the employment of paraprofessionals in other agencies. Over a third replied that either they were unaware of agencies which used paraprofessionals or they knew of some but had no specific information about them. Among those who possessed some knowledge in this area, the rehabilitation agency administrators most frequently referred to the type of settings in which paraprofessionals are found, such as social service agencies, schools, and hospitals. In contrast, the social service directors most often provided explanations concerning the reasons why paraprofessionals are used, e.g., to provide more comprehensive service or to improve service delivery.

Agency administrators' knowledge of the paraprofessional movement appears limited. Among those who are aware, there is little consensus concerning what a paraprofessional is and how he is or should be used in the agencies. When directors gave definitions, they were often vague. Furthermore, these definitions failed to include much recognition of the New Careers components of paraprofessionalism; that is indigenoussness, on-the-job training, a career ladder, improved service delivery, and the "bridging" function.

Recalling that twenty-eight of the agencies utilize paraprofessionals and that many of these programs are funded by New Careers money, the inability of their executives to define the concept clearly raises some question about how the New Careers movement is translated into reality. First, the agencies may be using New Careerists, but may simply define them under the rubric of "paraprofessionals." Second, the agencies may actually be using paraprofessionals

more in line with the New Careers guidelines, but the directors do not know this. Such an explanation implies the administrators' lack of involvement with the planning or execution of these programs within their agencies. However, most directors stated that they are responsible for program planning, staff development, the over-all organization of the agency and hiring of paraprofessionals, so this seems unlikely.

Third, it is possible that there is an insufficient body of practical, rather than theoretical, information regarding paraprofessional utilization. While half the directors stated that they had read some material regarding paraprofessionals and half had been contacted by someone representing New Careers, the explanations offered by these sources may not have been understood or accepted. Given the pragmatic nature of their administrative tasks, the directors, faced with budgetary problems and an increasing cry from the public to put people on welfare to work for their money, may have reinterpreted the purposes of New Careers to fit their own goals. There is some support for this view in the fact that while the majority of the agencies have instituted paraprofessional programs, many of these fail to embody some of the core ideas of New Careers. This possibility will be explored further in the following sections.

#### **Agencies Not Using Paraprofessionals**

About a third of the rehabilitation and a quarter of the social service agencies do *not* utilize paraprofessionals. The reasons for non-utilization vary. Despite the fact that the federal government as well as local colleges and universities with paraprofessional training sequences have assigned staff to inform agencies about the program, half the directors indicated that they had not been reached. Thus lack of contact could be one reason for non-utilization, although an insufficient one, considering that some moved ahead on their own, taking the initiative for instituting the programs themselves.

Of those who were contacted by college or government representatives, one-fifth refused to participate in the program. The reasons for refusal included a lack of funds for hiring the workers, too few clients to warrant additional staff, and a "dislike" of paraprofessionals.

Most of the directors of agencies which are not using paraprofessionals do, however, seem to be aware of the reasons for their use. There is recognition that paraprofessionals may improve the quality or quantity of service, provide information about the client and his community, and allow for more effective use of manpower. Social service directors in particular saw the paraprofessional as making a wide range of contributions, including providing referral, recruitment, and outreach functions, contributing new ideas and attitudes, and easing agency financial problems by providing an infusion of government training money. Three social service directors explicitly mentioned indigenoussness as offering a potential advantage.

Despite these supposed benefits the majority of non-users, both in rehabilitation and social service, had no plans to hire paraprofessionals in the future, citing small agency size and funding problems. One director felt that the reason his rehabilitation agency did not hire paraprofessionals was that it had always been

able to attract sufficient numbers of professionals, and in any event paraprofessionals required extensive training and supervision which the agency could not afford. Several in rehabilitation settings claimed that additional personnel of any nature could not be hired unless the position was granted by Civil Service, a procedure they regarded as a significant impediment.

Directors of agencies not using paraprofessionals were then asked what problems they would anticipate if such staff were employed. Half of the rehabilitation and three-fourths of the social service agency directors anticipated no problems. However, several qualified this by adding that problems could arise if the paraprofessionals were not carefully selected, trained, and supervised. Indeed, among the rehabilitation directors who did anticipate potential problems, difficulties in supervision were most frequently mentioned, along with problems in planning a career ladder and fears that the paraprofessional's responses might be inappropriate to the client's needs, e.g., fostering dependency instead of independence. One social service director had reservations about the professional/paraprofessional relationship, fearing it might be fraught with tension or resentment. A second believed that before the agency could hire paraprofessionals the attitudes of the staff, the administration, and board of trustees would have to change.

When asked in what capacities paraprofessionals would be used if hired by the agency, both rehabilitation and social service directors indicated outreach activities and general expansion of services to clients, with several rehabilitation heads also referring to assignment as an assistant to the professional.

It appears that if agencies not now using paraprofessionals were larger, had government authorization for the position, or had the funds for hiring, they would in all likelihood make use of these new workers. The non-utilization of paraprofessionals is not necessarily the result of "foot-dragging" by the agencies. When specifically asked about the advantages of using paraprofessionals, they are able to list them. For various structural reasons, however, most of these agencies do not feel they are able to employ them currently.

#### Agencies Using Paraprofessionals

Among the 23 rehabilitation agencies, 15 claimed to employ paraprofessionals, as did 13 of the 17 social service agencies. In three cases in each type of agency, however, the description of these employees did not fit the New Careers model of the paraprofessional. That is, one or more of the following applied: they were not indigenous to the client population; had not received formal on-the-job training; were not able to upgrade their status significantly because the agency had not instituted a career ladder; were not regarded as "bridges" between agency and client; or frequently served the clients only in an ancillary capacity. They were, on the other hand, "paraprofessionals" in the more general sense of the term, and in at least one case were involved in specific New Careers programs.

The time of first hiring the new staff varies by agency type. Twelve of the thirteen social service agencies hired these workers in 1968 or earlier compared

to rehabilitation where the majority were employed after 1968. Most of the rehabilitation agencies studied are public while most of the social service agencies are private, and this distinction is likely to account for the differences in hiring dates. If a public agency under Civil Service regulations seeks to institute a new program and to hire additional or new types of personnel, it must await approval and funds from a vast, often slow-moving, bureaucratic organization. Thus, although the first Scheuer Amendment enabling the hiring of New Careersists in public service programs was passed in 1966, it took longer for the monies and resources as applied to rehabilitation to be filtered down through the states to the local level.

Another reason for variations in timing is that the social service agencies which presently report more client complaints may have instituted the program earlier as a method of dealing with the chronic issue of client dissatisfaction. Furthermore, the New Careers ideology developed in a social work context, and was doubtless familiar to the social service directors through journals, conferences and similar professional sources. Alternatively, the rehabilitation agencies may simply have been more resistive to employing paraprofessionals on their staffs and did so only under duress.

The directors were asked to list the reasons they employ paraprofessionals. Table 9 presents a rank-ordering of replies. The most frequently cited reasons for use in both types of agency are to improve service delivery and to aid the professionals. The key New Careers notions of easing the manpower shortage and providing qualities associated with indigenoussness, i.e., rapport and links with the community, were less often mentioned. Since social service agencies are faced with the graver financial problems, their directors were more likely than those in rehabilitation to view paraprofessionals as a source of less costly labor. However, in general, agency similarities in reasons why paraprofessionals are hired are more apparent than differences.

Comparing the various capacities in which rehabilitation and social service agencies utilize their paraprofessionals, there are, again, few differences by type of agency (Table 10). While the directors most often mentioned using these workers in ancillary tasks such as intake or providing transportation, and as aids to professionals, about half referred to the fact that their paraprofessional staff render direct service to clients, such as diagnosis, treatment, and evaluation. The social service agencies were slightly more apt to use paraprofessionals to recruit clients, but overall, the utilization patterns were very similar.

The respondents involved in specific New Careers programs were also asked how their agencies were led to initiate this activity, which generally requires both on-the-job training and pay for the staff being trained. The sources of rehabilitation involvement are more varied than those in social service, with the most commonly mentioned being the intervention of a government representative who sought agency cooperation in instituting a program (Table 11). In contrast, the social service agencies were more likely to plan and institute their own programs or else to work with local colleges and universities in establishing them. In only one case did an agency begin a New Careers program as a result of client interest in the idea. In the majority of agencies with New Careers programs, funding for hiring the workers comes from federal or state sources.

**Table 9. — Rank Order of Agency Directors' Reasons for Hiring Paraprofessionals, by Frequency of Mention**

Reasons for Hiring Paraprofessionals	Rehabilitation Agencies		Social Service Agencies	
	Rank order	% Mentioned	Rank order	% Mentioned
Improve service delivery	1	(67)	2	(54)
Aid professionals	2	(53)	1	(62)
Ease manpower shortage	3	(47)	4	(39)
Link with community	4	(47)	5	(39)
Rapport with client	5	(33)	6	(31)
Miscellaneous	6	(33)	3	(46)
Pressure from funding sources	7	(13)	8	(8)
Less costly labor	8	(13)	7	(31)
Total %		*		*
N		15		13

\*Total is more than 100 percent because of multiple answers.

**Table 10. — Rank Order of Capacities in Which Paraprofessionals are Used in Rehabilitation and Social Service Agencies, by Frequency of Mention**

Capacities in Which Paraprofessionals are Used	Rehabilitation Agencies		Social Service Agencies	
	Rank Order	% Mentioned	Rank order	% Mentioned
Ancillary (intake, transportation, etc.)	1	(60)	1	(69)
Aid to professionals	2	(53)	2	(54)
Direct services (treatment, diagnosis, evaluation)	3	(47)	3	(54)
Referral	4	(40)	4	(39)
Clerical	5	(27)	6	(31)
Recruitment	6	(7)	5	(39)
Other	7	(7)	7	(8)
Total %		%		%
N		15		13

\*Total is more than 100 percent because of multiple answers.

Table 11. — Source of User Agencies Involvement with New Careers Training Programs

Source of Agency Involvement	Rehabilitation Agencies	Social Service Agencies
	%	%
No training program	(17)	(0)
Self sought by agency	(17)	(55)
Contacted by colleges	(8)	(36)
Director of agency sought such involvement	(8)	(0)
Contacted by government	(42)	(0)
Residents/clients sought	(0)	(9)
Union contact	(8)	(0)
Total %	100	100
N	12 <sup>a</sup>	11 <sup>a</sup>

a. Not all paraprofessional-using agencies had specific New Careers programs.

New Careers programs are designed to include released time for formal education. This is considered an essential element for skill upgrading and a part of the "career ladder." While all the agencies reported on-the-job training under the direction of agency supervisors, only five social service and four rehabilitation settings indicated that the paraprofessionals were taking college course work of some kind. Since only nine agencies made provisions for the formal education of their trainees, the directors were asked about any training programs set up within the agencies themselves. In eleven agencies, formal sessions were provided and taught on a regular basis either by agency supervisors or by specialists who were brought into the agency. Less than a third of the agencies either hired paraprofessionals after they had been trained and did not allow released time for continued skill upgrading, or else had no in-service educational program beyond on-the-job training and supervision in the specific tasks the paraprofessionals performed.

The ways in which agencies recruit paraprofessionals also vary. Those in rehabilitation are most likely to rely on application from interested individuals or on an outside agency to recruit for them, while social service directors are more likely to upgrade their own staff members by funneling them into the paraprofessional programs or by filling their allotted spaces with former clients.

Despite the fact that the New Careers model specifically suggests the use of paraprofessionals because of their unique attributes, when the respondents were asked to describe the characteristics of a good paraprofessional a third replied that they were the same as for any other worker. Half of the directors did list specific characteristics, the most frequently mentioned being human relations skills such as the ability to relate and to establish rapport. A few specified skills associated with trained professionals, such as detachment, sound personal judgment, and ability to perform certain professional tasks.

Only one rehabilitation and one social service director spontaneously mentioned indigenoussness as a characteristic of a good paraprofessional. However, when asked if they felt paraprofessionals had any *special* skills or advantages, over half from both types of agency responded that they viewed indigenoussness as an important factor, making the paraprofessionals a valuable information source or link with the community. In addition, they felt indigenoussness facilitated the establishment of rapport, although it did not guarantee it.

Several directors commented that paraprofessionals frequently gain the acceptance and trust of some clients more easily than other workers. They attribute this to the similarity of client-paraprofessional backgrounds, implying that initial lines of communication can be more easily established when the client feels comfortable with someone having similar dress and speech patterns.

In discussing the assets of paraprofessionals, one director said,

Paraprofessionals bring in fresh air. They have a greater knowledge of divergent life styles. They know the community and the people in it because they've been there. They know the problems and the life styles of our client populations.

Many of the agencies made use of this fact. Since the paraprofessionals are familiar with the client neighborhoods, many of which are in high crime areas, they know what to expect and how to react and are somewhat less fearful of them. Since they themselves have often experienced poverty, they tend to respond immediately to the client's needs, particularly such basic ones as housing, food, and medical emergencies. One social service director regards this as the special skill of paraprofessionals:

The paraprofessional worker can respond immediately to the emotions and needs of the client. Somewhere professionals have lost this ability. It is a gift to respond to one human being without being hamstrung by all the things they've learned in formal graduate work.

Another social service director pointed out another advantage of these workers:

Paraprofessionals bring a vital sense of impatience to the system. They have a greater ability to take a risk and fail. They don't see failure as a problem—they are less likely to be paralyzed by fear.

In contrast, several directors were critical of this very property as they felt it was destructive of the client in the long run. The sense of immediacy and the emphasis on the concrete which the paraprofessionals provide, foster dependence in the client and impede his rehabilitation. Rather than encouraging independent behavior, paraprofessionals may do too much for the clients.

What is implied here is a need for supervision and control over paraprofessionals; this was a constant theme in both types of agency. One director coupled this with a need "to protect the client from misuse by someone who is just learning." Others added that a clearer delineation of the



paraprofessional's role was needed. As the director of a large social service agency explained:

If the paraprofessional's role is clearly defined and does not make demands for either judgments, opinions, or actions for which he is not qualified professionally, then it is acceptable.

Another social service administrator added:

If paraprofessionals are given cases that require speedy, tangible results rather than long-term cases . . . there will not be problems. They should be assigned cases where the problems are not deep seated.

A third social service director anticipated potential difficulties in this area and took specific measures to avoid role conflicts and confusion among paraprofessionals and other staff members. Job descriptions were carefully elaborated in terms of tasks, rights, and obligations. Emphasis was placed on the use of the paraprofessional as an *aid or assistant*, making it clear that this was distinct from being a caseworker. Clients were also brought into the communications and were instructed to look to the caseworker for "professional help" such as advice, judgments, goals and to the assistant for tangible services such as clothing or housing.

### Problems Encountered in Employing Paraprofessionals

The importance of recognizing job distinctions between professionals and paraprofessionals is indicated by the problems one agency experienced. Because care was not exercised in the hiring of individuals and the matching of duties to workers, the agency found that the paraprofessionals were unable to differentiate between their roles and those of the professionals. They viewed themselves as performing the same tasks as the professionals for less pay and were bitter when they were reminded that the reason for this was their lack of training. The paraprofessionals refused to give up the roles they had developed for themselves and were hostile when supervision was attempted. As a result, the agency decided that since it could not take back the "illegitimate" power and authority the paraprofessionals had appropriated, it would, instead, terminate them in a face-saving way. Thus, the agency's goals and services were reshaped so that it appeared that the paraprofessionals could no longer be effectively utilized. While this might be defined, and was so by the agency director, as a failure in the use of New Careerists, it might alternatively be defined as a lack of adaptability in the "professional system." The tasks and roles defined as "professional" may have been equally as well performed by paraprofessionals. This view is supported by the fact that paraprofessionals do help with diagnosis and treatment in over half of the agencies which employ them. In the example given here, however, the professionals were "first on the agency scene," had thus been able to define the work responsibilities, and refused to surrender these in the face of change.

Although nearly two-thirds of the rehabilitation and over three-fourths of the social service agencies indicated that they had no control or supervision problems in the utilization of the paraprofessionals, the remainder did mention some difficulties, including personal problems, unrealistic expectations and failure to convey messages or appreciate the importance of client service. A few

directors voiced the opinion that the paraprofessionals' limited usefulness and the low level of their skills meant small returns as compared to the high investment in time and money required for supervision.

While two directors did not encounter specific problems in their employment of paraprofessionals, they did express reservations about their utility. One rehabilitation director commented:

The paraprofessional often cannot be helpful because the client is reaching up and feels that this [paraprofessional worker] cannot help him reach up. Their backgrounds are too much the same and what the client wants is a new kind of exposure, awareness and life style which is different from what the client has known all his life.

The director of a social service agency had a similar view:

The paraprofessional cannot damage the client but he might not be able to take the client as far as he can go. If, however, the client is willing to seek further help from the professional, then there is no liability.

When asked what liabilities paraprofessional utilization had for their agencies, about half of both types of executives replied none. Among the rehabilitation directors who mentioned a liability, the most commonly perceived is that the paraprofessionals attempt to assume too much responsibility and that staff conflicts result. The opinions of social service directors were more varied and included the unreliability of paraprofessionals, their limited competence, their need for close supervision, and poor client service stemming from granting paraprofessionals too much autonomy.

Four rehabilitation and three social service directors stated that they viewed client "mistreatment" as a liability stemming from paraprofessional utilization. Examples were theft and seduction, as well as accidental personal injury; one worker followed a procedure dangerous to a diabetic client, and one director in each setting commented that he was concerned with the paraprofessionals' violation of client confidentiality. Two others felt paraprofessionals over-identify with clients thereby impeding the treatment process. Finally two rehabilitation directors mentioned that their clients resented the paraprofessionals because they received treatment by a status peer.

In a few cases, the professionals do not willingly give responsibility to the paraprofessionals. In one agency paraprofessionals at first were given only minimal, routine jobs which they vigorously protested. This served to increase the fears of the professionals who thought they were to be replaced. The professionals argued that paraprofessionals had no right to work with clients in a service capacity since they were not adequately trained for this task. The paraprofessionals, in turn, banded together and became active in a union using it as a mechanism to advance their goals. This produced additional resentment from the professional staff. The end result was a restructuring of the agency with the isolation of the two groups by place and role in an attempt to minimize potential areas of conflict.

When agency directors were asked whether they thought professionals objected to having paraprofessionals on the staff, nine out of ten said no, and in

the remaining cases the answer was qualified. Professional opposition faded, it was felt, as the abilities of paraprofessionals were recognized, or as supervisors became reconciled to paraprofessional utilization.

The directors believed, however, that complaints from paraprofessionals were more numerous. Over two-thirds of the rehabilitation and half of the social service agency heads stated that paraprofessionals on the staff had complained about the routine nature of their jobs and their lack of responsibility. This suggests again that agencies may not be upgrading job skills.

Two-fifths of the directors indicated that no changes had occurred in their agencies since they started using paraprofessionals. The remainder reported changes in the agencies' structure, goals, or services; for example, an expansion of services and the use of paraprofessionals as the role model for clients; increasing dependence on the paraprofessionals as an information source; and assumption of more responsibility for the client by the paraprofessional in the absence of professionals. Only one social service director reported the formation of a "bloc," or separate group, of paraprofessional workers within the agency. The majority of agencies found that their small size, the small number of paraprofessionals employed, and the use of a team approach to service acted to inhibit the consolidation of paraprofessionals into a separate group.

### **The Career Ladder**

The career ladder concept is central to the New Careers ideology. It involves both opportunities for training and a planned scheme of advancement on the job. Yet only four rehabilitation and three social service directors reported that paraprofessionals are granted released time for further education. Moreover, in about half the rehabilitation and two-thirds of the social service agencies, the directors indicated that a definite career ladder had not been instituted for the paraprofessionals.

A second issue relating to career ladders is actual paraprofessional mobility experience, with or without a formal plan. One-third of the rehabilitation and approximately three-quarter of the social service directors report that their paraprofessionals have advanced into higher level agency positions. In one instance in each setting this advancement involved promotions to supervisory positions with well established career ladders. In the other cases, only limited vertical mobility was involved and this occurred only within the nonprofessional sphere.

What factors account for this failure to institute a career ladder? One respondent whose agency specialized in the development of programs to upgrade skills explained:

When you introduce trainees into an already irrational circumstance, it tends to focus on much of the irrationality. For example, communication problems that were ignored tend to become paramount. Designing a career ladder is not an easy thing. Many agencies probably do not have a career ladder, not because they didn't take the program seriously, but because of a lack of know-how. It takes at best four to five experienced people at least six weeks to design a career ladder.

This respondent located the source of the problem in a lack of resources—knowledge, funds, time. Another respondent shared similar feelings but added he believed the structure of New Careers itself discouraged career advancement. He said that if New Careers is really serious about significantly upgrading the skills of the poor until they reach the professional level, then government support for programs should be for a longer duration than the maximum of two years. He felt that New Careers had covertly opted for giving small amounts of help to large numbers of people.

This raises another issue concerning the New Careers programs—do the agencies institute these activities in order to benefit from a few months to two years of labor at the government's expense after which the paraprofessionals are released? This would be the case, for example, if paraprofessional services were used while the government was paying most of the freight in the guise of "training money," but then the services were dropped after the "training" was completed. Over three-quarters of the directors indicated no such pattern. They either hired paraprofessionals *after* they were trained, trained them in agency programs and then did continue them, or gave them jobs and then trained them. Only three agencies failed to hire paraprofessionals after in-service training. This occurred, it was claimed, because of an unanticipated lack of funds. The data suggest that as a rule paraprofessionals are not simply used to secure government funding.

#### **Changes in Utilization**

One year after the initial interviews, the agency directors were again contacted to determine if any change in paraprofessional utilization had occurred in the interim. A questionnaire was mailed to each of the 40 directors originally interviewed; this was followed by phone contacts with agencies which either failed to respond or indicated that some changes had been made. Four rehabilitation agencies did not reply to the questionnaire or the phone call.

Twenty-one agencies reported no changes in their paraprofessional status within the one year period (Table 12). Approximately, three out of ten agencies in each setting reported that some change in the agency's use of paraprofessionals had occurred. In addition, two rehabilitation projects were terminated and the paraprofessionals dismissed while a third rehabilitation agency was in doubt whether it would be refunded and could continue.

Among the twelve agencies reporting changes in their use of paraprofessionals only two had begun to use these workers for the first time, and only one hired and is using paraprofessionals in terms of the New Careers model.

#### **Summary**

In short, while four out of five agency directors were able to provide some definition of paraprofessionals, the most frequently mentioned characteristic concerned educational level. The directors generally viewed paraprofessionals as lacking the "formal credentials" of a graduate education. A few were also aware of the New Careers model which emphasizes empathy, "indigenous" background and the ability to learn on the job rather than academic

Table 12. — Changes in Paraprofessional Utilization One Year Later

Changes in Utilization	Rehabilitation Agencies	Social Service Agencies
	%	%
No changes reported	(39)	(71) <sup>a</sup>
Changes reported	(30)	(29)
Program terminated, or not refunded	(13)	(0)
Not ascertained	(17)	(0)
Total %	<u>99</u>	<u>100</u>
N	23	17

a. One agency in this group is actively seeking funds for a paraprofessional program they have planned.

qualifications. Thus, although agency directors were familiar with the general category of "paraprofessional," they were less aware of New Careerists as an important component of this category.

About a third of the rehabilitation and a quarter of the social service agencies do *not* utilize paraprofessionals, chiefly as a consequence of structural problems such as small agency size, lack of funds or the need for government authorization to hire additional workers. Among the majority who *do* employ paraprofessionals, adherence to the New Careers model in practice—hiring workers indigenous to the community, trained on the job, and provided with a career ladder, who improve service delivery, and serve as a bridge between the agency and the community—was not much in evidence.

Only about a third of the agencies allow released time for college course work to train the paraprofessionals, and about an equal proportion provide some regularly scheduled training sessions on the job. Half of the agencies use the workers in direct service to the client, the remainder use them in ancillary tasks. While many of the directors recognize that indigenoussness is an important characteristic of the paraprofessionals, they also stress the fact that the workers need much supervision and control. Such supervision tends to emphasize existing agency standards rather than encouraging the new workers to display the presumably special skills they brought to the job. Furthermore, only half of the rehabilitation and a third of the social service agencies have a definite career ladder established so that paraprofessionals may advance to more responsible positions. On-the-job experiences are mixed. Directors have few complaints about the task performances of paraprofessionals, but some of these workers are not satisfied with the routine quality and lack of responsibility in their jobs.

A second interview with agency directors a year later indicated little change in the use of paraprofessionals. Five of the agencies added to existing paraprofessional training or developed new training programs. Two other agencies hired paraprofessionals to fill new positions within the agencies while three hired additional paraprofessionals for existing positions. Generally, the

new developments and the changes in old programs left them in about the same congruence with New Careers models as they had been a year earlier. In short, no shift away from the findings reported in these pages was evident after a year's additional experience with the use of paraprofessionals. The data suggest, perhaps not unsurprisingly, that the agencies have, for the most part, taken the New Careers model and molded it to existing agency structures instead of opening up and changing service patterns.

## V. SUMMARY AND CONCLUSIONS

The findings of this empirical study must be evaluated in terms of the assumptions of the New Careers ideology. Pearl and Riessman (1965) stress that the hiring of paraprofessionals would benefit the agencies, the clients, the professionals and the workers hired, and improve the relationship between the community and the agency. Granted that the data reported here are from the perspective of the agency directors, these materials do suggest that in practice the benefits obtained from the program are not as great as anticipated by its major proponents.

Social service and rehabilitation agencies, including the two-thirds which have hired paraprofessional workers, still report a variety of client complaints about the kinds and the quality of the services received. Most of these agencies brought in New Careerists prior to 1968; presumably some anticipated improvements in client relationships should have occurred by 1971. Human services work may be an example of the "what-have-you-done-for-me-today-phenomenon"—whatever improvements have been made, more are needed and demanded. As we have seen, however, approximately half of the agencies employing paraprofessionals do not use them in direct service to the client. If, as assumed by the theory, hiring the poor to serve the poor in *direct relationships* improves community attitudes, then this postulate has not been given a fair testing. Some support for the theory, however, is provided by directors who reported that paraprofessionals used in direct service to clients provided useful information about the community and were in some cases better able to develop rapport with clients.

It is also, perhaps, unrealistic to assume that simply hiring new workers will alleviate some of the problems the agencies face. Yet as Grosser points out, such institutional change was exactly what was expected in at least one Community Action Program which hired indigenous workers. As he notes:

A somewhat anomalous circumstance surrounds this social change objective in that it is articulated by the staff of the CAP agency which administers the federal funds but not by the public agencies which are the targets of the change. Thus, the antipoverty administrators conceive of the nonprofessionals as change agents while the welfare agency sees them as facilitating existing services. (Grosser, 1969:130)

Although agency change has apparently been one of the aims of the New Careers program, many agencies seem to treat the new workers as *professionals manqué*; the paraprofessionals are expected to adapt to the *existing* agency standards rather than forcing the agency to question its method of operation as it was hoped the infusion of new workers would accomplish.

The theory of New Careers also assumes that the disadvantaged would be hired to fill these paraprofessional openings. While almost half of the agencies do hire blacks and other minority group workers, many of the directors emphasize the importance of criteria for hiring such as educational qualifications, previous work experience, and references from former employers. This means, of course, that the hard core poor, many of whom are educationally handicapped and consequently unable to obtain permanent employment, are essentially excluded from this program. It is presumably those who had the least trouble obtaining jobs and "working within the system" who are being selected for employment. This is the "creaming" process to which Goldberg (1969) refers.

The New Careers definition of "disadvantaged" does not appear to distinguish sufficiently between various categories of the poor. Children, the decrepit aged and the severely handicapped are all part of the "hard core," but are hardly candidates for paraprofessional employment. Among the relatively young and the able-bodied, however, there are also variations, by level of education, previous job history and criminal record, if any. According to the New Careers model, these variations should be irrelevant in selection of candidates for paraprofessional employment. It is apparent that in real life they are not

New Careers also assumes that workers are provided with on-the-job training and released time for additional training to maximize their chances for job mobility. Again, many of the programs do not provide this option. Only a handful of the workers in the agencies studied here have been moved up to new positions of greater authority. Thus, so far, they seem encapsulated in the lowest level positions in the agencies with, as their work is presently construed, little chance for advancement.

The agency profiles offer some insights as to the reasons for these findings. Most of the agencies are relatively small in staff size, and many have established patterns of using part-time workers and volunteers, and sharing client service responsibilities through linkages with other agencies. This, coupled with the fact that more than half the agencies make fewer than five replacements a year, indicates the structure does not encourage hiring paraprofessionals or integrating them into the system. Where staff expansion is possible, agency directors prefer professionals, or persons with acceptable educational backgrounds. Agency heads are more concerned with the attitude of the general public than that of the client population, largely because broader publics represent funding power, whether the organizations are supported by government expenditures or private contributions or both. All these factors represent structural constraints on the utilization of paraprofessionals, despite the goodwill of the individual directors.

#### **Some Broader Issues**

These findings raise some broader questions about professional-paraprofessional relationships. First, do paraprofessionals become socialized into paraprofessional or professional norms? To what extent are the aims of New Careers ingrained into paraprofessionals? In the majority of the agencies which

employ them, the new workers are trained on the job and through special sessions in the work setting. Many of these training sessions are taught by agency employees. Presumably, what they impart to the trainees are the attitudes and orientations toward clients they themselves have learned, often in their own professional training. Thus, for a paraprofessional to be successfully socialized into his setting, he must begin to accept these attitudes himself. He must become more detached, otherwise he is accused of helping the client too much; he must become autonomous otherwise he does not take enough initiative and requires too much supervision. The end result is that the paraprofessional may be placed in an inherently conflict-ridden situation within the organization. He may become a victim of the competing and irreconcilable demands of clients, professionals, instructors, and administrators.

Second, the paraprofessional's situation is an anomalous one, probably typical of that of many "in house" ombudsmen whose positions have been established to provide clients (consumers) with an advocate. Being embedded in the agency structure makes it difficult for the New Careerist to maintain the client's perspective. In addition, the fact of seeing case after case of economic deprivation, or mental or physical disability, each of which is deserving of more time and resources than the agency or the worker can provide, is likely to create strains for the worker. In order to protect himself the worker may become more emotionally detached from the clients; he may begin to treat the clients as "cases" to be processed through the system, rather than as individuals. This is particularly likely, given the lack of social supports within the agency setting to help him withstand the emotional strain of giving personalized treatment to clients.

Perhaps the advantage paraprofessionals have over the trained professionals who have adopted the norms of detachment and affective neutrality is that, at least for a while, they are able to respond to the clients' needs in a direct and immediate manner. Grosser (1969) suggests paraprofessionals are better able to maintain this posture if they work in the community rather than the agency. Given the fact that many of the agencies here use paraprofessionals within the agency rather than in the community, the likelihood is that the workers will have greater difficulty maintaining a paraprofessional orientation.

Gans has suggested that many middle class caretakers, or human service workers, adopt a missionary orientation toward their clients; they expect them to accept middle class values as well as middle class services. The clients, on the other hand, would prefer a service-oriented model of care in which the agents help them obtain goals they cannot obtain on their own, or else a market-oriented approach in which the client gets "what he wants" (1962:143). In hiring the poor to serve the poor, New Careers was presumably opting for a service or market model of care. The findings presented here suggest that there is a lack of flexibility in the present organization of the human service system; thus New Careerists over time may begin to lose this ability to provide a service or market orientation. They too, may begin to be missionaries expecting changes in values from the clients along the lines, "I made it out of the ghetto, why can't you?"

Third, if such changes in paraprofessional standards are a "natural" concomitant of agency work, efforts must be made to move paraprofessionals up



through the agency structure so that room may be made for other, not already system-socialized New Careerists, in a continuous infusion of "new blood." As the paraprofessionals are presently used in most agencies, however, they are not being moved up to more responsible positions, and vacancies for new workers consequently do not occur. In the absence of this opening up at the bottom which a career ladder engenders, the agency may find itself faced with the same problem it had previously: that is, workers who cannot meet the needs of the clients. The "old" paraprofessionals may still in some ways look and talk like the poor but they may not over time "think poor" anymore.

Fourth, the analysis comes back to the question of which came first, the professional training or the need for "professional" distance. The issue is a difficult one because it is intertwined with the whole matter of status. In our society greater amounts of education confer greater prestige which in turn may be translated into higher salaries. Freidson (1970) in his discussion of the physician as an example *par excellence* of a professional suggests that his ability to define work roles for others and to maintain his own "turf" comes, in part, from the fact that he recognized the importance of this before others in the health care field and organized to protect his own status. The same response can be seen among the more recently professionalizing rehabilitation and social service workers; they fight whatever they see as encroachment on the terrain they have staked out for themselves. In doing this, they cite the importance of the education they have received, and the standards they have set for handling clients. Until recently they have resisted any efforts to share their status with paraprofessionals, although currently one type of "paraprofessional," the B.A. social worker, has been accepted in the professional social work association.

On the other hand, if such things as "professional" characteristics had not already been established, it might be maintained that they would have been developed on the job to protect workers from the realities of human service work. The best intentioned and structured paraprofessional program may find, over time, that the workers have begun to develop professional standards. In fact, New Careers is designed to encourage this, at least in part, by providing the opportunity for a career ladder and increasing amounts of education.

Fifth, the New Careers movement itself must be examined in greater detail. Its assumptions may be unrealistic. The previously unemployed or underemployed may not be able to move from the lower class to the middle class by means of New Careers training programs. Liebow (1967) has pointed out the difficulty in undoing the effects of years of deprivation and underemployment. Not only is steady work needed but so is encouragement and motivation. It should also be noted that the program assumes that people can take on white collar agency work without also assuming some white collar values. The new workers may need more support than was anticipated let alone provided by the programs as they were actually instituted.

#### **Regulating the Poor?**

A final point concerns the role of New Careers as it has been introduced in agencies and encouraged by the flow of government monies for hiring

paraprofessionals. One administrator interviewed felt that the program had opted for small amounts of help for large numbers of people; this, he felt, was not really the way to integrate such workers into human service and to expect them to be able to advance through the system. His view is consonant with that of Piven and Cloward (1971) in their book, *Regulating the Poor: the Functions of Public Welfare*. They suggest that, since the sixteenth century, welfare programs have been used to regulate civil disorders and labor flow in a cyclical pattern. First, as a society's elites become frightened by civil disorders or the prospect of civil disorders they put pressure on the government to "pay off" unemployed potential rioters with doles; such payments are small enough to indicate the demeaning nature of unemployment yet, hopefully, large enough to avoid mass revolt. As the welfare rolls grow larger, concern increases about the continuing availability of a flow of cheap labor into the market place. Thus, in order to provide a sufficient pool of such labor, efforts are made to decrease the welfare rolls. This is done in several ways—by simply decreasing the numbers of people eligible for coverage and by encouraging, if not forcing, welfare recipients to take training and employment which the government, responding to cries from the working electorate, proposes. Such programs, Piven and Cloward suggest, are not meant to help the worker substantially; he is still kept in his place. They do, however, keep the otherwise unemployed off the streets and provide some needed service to the society while at the same time reaffirming the work ethic.

Thus, taking a leaf from Piven and Cloward, it is possible that despite the rhetoric and intentions of New Careers this program is simply another version of "regulating the labor flow." Efforts to institute New Careers programs and, even more importantly, to encourage, if not force employment of the disadvantaged in return for welfare payments, have increased in the recent period. The general public seems more and more disenchanted with "giveaway" programs for the poor: greater numbers of workers are needed to provide foods and services, therefore, people should not be encouraged to "loaf" on welfare. As we have seen, welfare and rehabilitation agency directors in the metropolitan area studied are particularly concerned about public attitudes toward their agencies. Thus, these agencies may, consciously or unconsciously, hire paraprofessionals but not treat them as "deserving" of advancement within the agency.

As an overall assessment, the conclusion must be that New Careers has provided some work openings for the disadvantaged, but the program has not fully lived up to its promises. It is doubtful that it will be able to do so until a number of changes occur. From one perspective, public attitudes toward the disadvantaged must become more humanitarian. Professionals already ensconced in agency positions must learn to define and share their work tasks with paraprofessionals. Recognition of the special contributions of paraprofessionals must become more widespread. From another perspective, these changes are less likely and even less salient to the future of paraprofessionalism than those wrought by these workers themselves. Already in many parts of the country they are organizing, giving themselves a fresh title of "new professionals," demanding and receiving admission to professional organizations, and successfully pressing for increased earnings, training and advancement opportunities, and higher status. The opening up of the human

services sector of the economy to some of the ideas advanced in the New Careers model may thus occur as the result of the interplay between changing public and professional attitudes, and the successful social movements of paraprofessionals themselves.

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