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A TIME OF CHALLENGE*

A time of challenge is a time when something important to us is not as secure as it once was; it is a time when there are risks; but it also can be and often is a time for renewed commitment and growth. It is now that time — a time of challenge — for those of us who want the benefits of rehabilitation for all people who need them.

With a new rehabilitation law, with a revenue sharing political philosophy, with unofficial papers advocating the phasing out of the direct funding of helping services on the part of government, what do we do?

In a time of challenge, we take the initiative. We take the initiative not for ourselves but in order to provide the services which will restore thousands of people to productive, happy lives. In my opinion, this initiative must take three forms.

Broadening the Concept of Rehabilitation

The concept of rehabilitation must be broadened so it can apply to still more human problems facing our society. Rehabilitation is not only the answer to persons who have a physically handicapping condition. It is also the answer to persons who are angry at society, to persons who turn on society, to persons who cannot work productively, to persons who are temporarily lost in our society.

The concept of rehabilitation — the assumptions, the goals, the structure, and the values it represents — are indigenous to the United States. Out of decades and decades of history, the United States has been the one nation that has come up with an organized structure which restores individuals and helps to integrate them once again into society in a productive way. Prior to this, other societies largely counted handicapped people out and in time did away with those persons who did not correspond to a particular set of norms.

The concept of rehabilitation for physically handicapped persons has now been well tested. We should develop this idea to the point where it replaces those aspects of our society that seek retribution from individuals who are different. In other words, the concept of rehabilitation with its purposes of restoration must become not only a way of thinking but a way of life.

Rehabilitation in Practice

Rehabilitation has been the most needed, best administered, most thoroughly evaluated, and probably the most effective program supported in part by the Federal government. It is not only cost effective, it is also client effective. In spite of the

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generally good reputation of rehabilitation as a Federal-State partnership, performance is still the name of the game.

If people continue to receive positive support from rehabilitation and if they receive help that results in their independence, they will support rehabilitation programs politically. The real test is still in the field. Never before has it been more important to demonstrate the effectiveness of rehabilitation through performance. Success in the field is the success which counts for the client and his family. Success here is also the building block which develops additional resources for rehabilitation at the state and national levels.

Sources of Leadership

A time of challenge is inevitably a time for leadership. The rehabilitation movement in the United States is very young as a major social service. It has developed well and been recognized as effective largely because of the dynamic personal leadership of persons like Mary E. Switzer. We still need this kind of strong, personal leadership but we also need more.

Leadership in a democratic society does not stem only from persons in authority. It more nearly takes the form of a large number of individuals who can and will discharge a set of leadership functions. We need professional individuals, clients, and friends working for rehabilitation who can point up the human problems of people who can find and share information about needs, who can demonstrate consideration for other people and other ideas, who are not afraid of evaluation, and who will work together. If we can develop this kind of dynamic interrelationship among us, leadership will emerge and the functions of leadership for developing, broadening, and implementing rehabilitation programs will be well served.

In a time of challenge, let us work together. Let us evolve a still more comprehensive and dynamic concept of rehabilitation. Let us demonstrate the human effectiveness and the cost effectiveness of rehabilitation. Finally, let us express our commitment to people and to this purpose by means of astute leadership.

In closing, permit me to share with you the words of Mary E. Switzer because we need to think about their meaning often:

"Life is faith and love, but most of all hope."—Mary E. Switzer

