

# Dialogue among experts

Elia Lázaro, Esther Zuñiga and Guadalupe Pérez Luna, three widely known social workers sat down to talk about one matter: the preparation of social workers who work with persons with disabilities.

## Do you think that social workers are trained to intervene in the field of disabilities?

*Elia Lázaro.* "The answer is a categorical 'no', however, I believe that Social Work in its formation, and by the nature of the profession itself, has elements which allow for developing certain attitudes and aptitudes such as being sensitive to problems faced by the population, to groups who are in situations of risk or vulnerability, but it is definitely not enough to possess these attitudes and aptitudes. Also needed are knowledge and training in order to understand what the conditions of the family are, what the environment in which the person with a disability moves is like and then understand what the disability implies. So, the social worker should know what disability is, what its effects are and what its needs will be?"

"Also promoting networks, observing the frequency, the situation. This leads us to revise diagnoses, statistics, keeping in mind an integral vision in order to deal with the matter of disabilities without limitations."

*Guadalupe Pérez Luna.* "Yes, if we consider disability as a social problem and see the

naming of the social worker. To begin with, we might think that we are trained for caring for the problem of disabilities because of the all the curricular baggage we have from our formation, however what we find in reality is that Social Work with its wide range of subjects we study is prepared to have a bearing on various areas.

"From my point of view, we could say that Social Work has obtained knowledge on disabilities quite. We can talk about knowing about disabilities, in its various versions, but being trained to deal with them is quite another matter."

*Esther Zuñiga.* "Elia, you will remember the discussions that we had when the long distance diploma course on social attention to disabilities was designed according to research carried out in professions related to Social Work—Psychology, Sociology and Pedagogy at various universities--, even in Latin America and Spain, and unfortunately the matter of disabilities has been absent from studies, and I think we should begin, in general, from the perspective of Social Work. Once disability is established as was set down in the DM Law, as a result of an illness, an accident (a genetic accident or an accident which may take place at any

time during a person's life), what we should do is achieve the social inclusion of persons with disabilities. This social inclusion has to begin in the family and we should be prepared to intervene with families in a state of permanent crisis.

"We must remember that international organizations, UN, WHO, Pan-American Health Organization, the World Development Bank, have told us that persons with disabilities are the poorest of the poor, the most marginalized of the marginalized, who have historically always been made invisible, who do not have real presence. In Mexico, while under the leadership of Rincón Gallardo, there was a fight for achieving the Convention of the Rights of Persons with Disabilities, and fortunately at that time, thanks to the Optional Protocol included by the Convention, the UN was able to call countries accountable to compliance with this convention."

*GPL* "At the National Institute for Rehabilitation this subject is dealt with and the director pays special attention to achieving the social inclusion of the patients. There is a service which is called Rehabilitate (Rehabilitate yourself), in which two social workers are trained to carry out inclusion exclusively in this program. The Institute is focusing on taking care of disabilities in its various areas, and this has proved to be a great challenge for the administration. It is a fourth level institution, for the development of research, medical attention and for the advancement of science which is being developed and for the team which works there. However, I feel that inclusion is a matter which is still pending."

*EZ*, "I worry because the institute is not new. There was a previous institution, the Centro Nacional de Rehabilitación (National Rehabilitation Center) and you say the matter of social inclusion is still pending, but basically based on labor inclusion, when we..."

*GPL* "Partly...It would be ideal if all patients who are admitted into the hospital..."

*EZ*. "How many people are attended there? Do you have any idea? Hundreds, thousands?"

*GPL*. "Thousands..."

*EZ*. "How many?"

*GPL*. "I would have to look at the statistics."

*EZ*. "No, no. Give me an estimate."

*GPL*. "Maybe 700,000... In visits with doctors or pre-visits?"

*EZ*. "First let me make something clear. We couldn't think that job inclusion has had even the least bit of success or the least progress, when the unemployment rate for persons with disabilities is at about 80%. No collective can live with these unemployment rates, but besides that I'm worried because of the idea that through institutions which basically attend to aspects of rehabilitation, we think social rehabilitation can be achieved... We can see the result of the Teletón which even changed the name of social workers (now they're called social integrators)..."

EL, "So, once again the social worker does the work that an institution should be doing because there are not enough human or pedagogical, psychological and teaching resources. The social worker stands in for and becomes a para-teacher. What makes the situation worse since they're not acting as social workers specialized in disabilities, nor as teachers or someone prepared to teach this sector of the population."

*GPL.* "The thing is that to talk about social inclusion we would have to go back to the family. If we as social workers see that those who care for the patient do not include the person with disabilities and want us to take care of the whole family..."

*EZ.* "And I can't understand this within the sphere of physical disabilities. I would understand it in the sphere of mental disabilities where people at times have a disability that is so severe that they can't even communicate, but even this should be a motive for regulations in which the person is notified that he/she will receive rehabilitation services."

"But these are like perverse games, as if people somehow are not prepared, and so that this lack of preparation does not become obvious, it's preferable for social inclusion not to take place. But, it should be perfectly clear to everyone that the social aspect is going to be everything: family, education, work-related, sports-related, cultural...We must be aware of the fact that we are in danger of having a disability, that 70% of all disabilities are acquired and that we are candidates for forming part of this group at any time. So it is a complex situation which is the responsibility of social science."



Esther Zúñiga

*EL.* "Yes, and this lack of knowledge leads us to follow a series of myths on things surrounding persons with disabilities. And then we once again victimize them, minimize them. If I don't know, I assume that a person with a physical disability which is visible cannot do many things, due to lack of knowledge."

*GPL.* "Yes, added to the confusion related to the quality of attention and why? Who am I going to work for? For the person with disabilities or for the institution? I'm obviously in the institution and it should be for both of them, but I shouldn't lose sight of the person with a disability."

*EL.* "The way you present it, the essence of follow-up and evaluation which the Social Worker should carry out in each study, on each visit, with each interview. We won't



Elia Lázaro

have the same data for a patient following the first interview as six months later. The diagnosis, the prognosis or the work plan will vary depending on the time that elapses, because besides they have had medical treatment and also this will be projected on the subject and their family."

*EZ.* "I imagine that all of the patients at the Institute have to have some degree of mobility, that is, the Institute does not make house calls. I'm thinking about a bedridden quadriplegic who cannot move. Then, if he goes for a visit to the doctor, he should also go to the social study, I mean, I don't know why there should be exceptions and I don't see the figure of a Social Worker supervisor there, or a leader within the group of professionals who directs the behavior so that it is appropriate, professional and ethical.

"The Convention says that we must let the persons with disabilities speak; they

know what they want, and we, who do not have the disability, are acting as interlocutors--that no one has asked for."

*EZ.* "But we're talking about someone who leaves the service, who doesn't go to his/her doctor's visits: a more than important reason for he/she to be the one who begins the process of admission all over again, because he/she is the one who has to make the commitment of not abandoning the treatment again, because this affects the process which he/she was undergoing. It is also reflected in the Institution where there are very limited spaces for receiving attention and there are people who wait months or sometimes years to be attended, to be operated on. Everyone complains that the appointments are very far apart one from another, and that is why they quit going, so I think we should ask them to be more responsible.

"Guadalupe, do you have people who are exempt?"

*GPL.* "Yes."

*EZ.* "A lot?"

*GPL.* "The socio-economic study was recently modified..."

*EZ.* "The format?"

*GPL.* "The format and way to fill it out, everything. So these classifications, far from being at the level they were before, are decreasing and in two months that I've had out patients, I've carried out three extensions from the socio-economic study, not because Social Work can make that decision; for two different reasons."

EL. "Using the instrument that's established. They fall into this scale and that's another story."

*GPL.* "That's another story. So what I want to get across is that with the new socio-economic study, which has already been published in the Official Gazette, that is the same for all institutions, however what I see is that the instrument is far from reality in some of the ailments which are taken care of in the various institutions."

*EL.* "I don't think it's only the instrument that is the problem, like you say. It is very inexact to think that depending on how much you have, you will be in a certain classification. Two people may have the same income, but totally different living conditions. So they can't be given the same classification, even though they have the same income."

*EZ.* "Just now that you mention it, I remember we say that in attendance: people who came painted the most depressing scenes, full of deficiencies and something which was of utmost importance to us, the famous house calls so that the diagnosis is as true to fact as possible; sometimes we made unexpected visits because people even prepared the scene so we could see the poverty which in reality did not exist... This has been lost now, too. All of the process of interviews, observation in order to define at a given moment, whether they were telling me the truth."

"Recently I had an experience with some students. They were given the opportunity to make the social study of a case. They began to carry out the instrument and they left to ask what they were supposed



to be doing, which is a terrible mistake, to leave the person you are taking care of to go ask what you are supposed to be doing and what you have to ask. This takes us back to the initial question: Are we Social Workers prepared...? The kids need to be, I think, with other perspectives, more committed, with more of a calling."

*EL.* "I agree with you on the lack of calling. I understand that many times young people are not sure, clear about what they want to do and so they arrive without a true calling. But the ones who for me are even worse are those who when they finish their studies still have no calling, which degenerates the conditions in which we live."

"It is important to plan, above all realize that in our school something has to be done about our study plans, profiles, subjects so that students leave school with this preparation, this vision, this calling and especially, prepared to attend to persons with disabilities."

*EL.* "I'm going to close this session and return to the original question: Are Social Workers prepared to intervene in the field of disabilities?"

*GPL.* "(Laughter) We had already said the answer was 'no'. With respect to experience and from what I can see, Social Work is attending to persons. We are not training, not real training, but the professional Social Worker attends to people with disabilities so that that person may intervene. He will mobilize his family network, economic resources, obtain support, etc, but once this person sees the doctor, we don't see him again."

*EL.* "I agree that he/she is not prepared. I've said it since the beginning, but Why aren't we prepared? What's going on? There are many questions that need to be taken into account: study plans, school, the function of Social Work as a former of resources, the political conditions of government, the economic conditions as a result of the former, and this is very complex.

"We are not prepared and we need to put forward a series of deficiencies and things which have been lost and should be regained. And I think that, all things considered, the positive element is that we can see some students interested in the issue, we now think about this sector of the population and we are convinced that Social Work should

and can be a field of action and intervention for persons with disabilities."

*EL.* "I believe that the National School of Social Work has the resources for organizing and offering a diploma course on disabilities, but it must be pointed out that those people who work in this area do not benefit much in the matter of resources. In general, social workers who do field work with the persons with disabilities were paid, until recently, one thousand two hundred pesos a month, and this is very sad and is linked to people's preparation.

"And there's something else: the university has a commitment since fortunately there are students, administrative personnel and professors with disabilities, and we have to give them an integral answer to their needs and take this as a starting point. Elia, you were saying that if there are people committed to the issue of disabilities, and if we are proud of being committed to the issue, we feel deeply disappointed when we don't find that the support we would hope for so this can go forward, and we have the moral commitment to fight within our possibilities so that the issue of disabilities is included in the new proposal for the study plans as a subject, and that it be taught by a professional in the social field, not by a doctor.

"And that is the end of our presentation."