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# The Social Dilemma of the Deaf Professional Counselor

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*...the absorption in professional work is not partial, but complete; it results in total personal involvement. The work life invades the after-work life, and the sharp demarcation between the work hours and the leisure hours disappears. To the professional, his work becomes his life.*

The foregoing statement by Ernest Greenwood (1962) may be considered as especially applicable to professionals working with the adult deaf. Merging of work life and after-work life may result in difficulties for deaf professional counselors, and it is this group of professionals to which this article is addressed. Hearing professionals serving the deaf may find the issues discussed relevant to their own roles, however.

At the risk of being labeled a "cold professional" I would like to consider an issue faced by most, if not all, deaf professional counselors. This issue concerns extraprofessional interaction between deaf clients or potential clients and deaf counselors. While the issue apparently has escaped previous comment in professional writings, it has been frequently discussed by individual counselors. That such interaction occurs may be accepted as a fact. Yet, this extraprofessional interaction is almost impossible to avoid. Since such relationships are frowned upon by those in the helping professions, the deaf professional is faced with what may be termed a social dilemma.

Most hearing professionals in the helping professions turn to other professionals for their social satisfactions. This is partly a result of the demands of the "professional culture," and partly the result of common interests among professionals. For the deaf professional, obtaining social satisfactions for himself and his family may present unique difficulties. As with most people, he prefers to associate with those with whom he can establish effective and comfortable interpersonal communication – in this case, other deaf people. Because of his deafness, his choice of social activities becomes relatively restricted and his opportunities for social interaction with other professionals are limited. Because there are usually few professionals working with the deaf in one locality, the deaf professional is often forced to select his social associates from outside the profession. More often than not, then, his social participation may involve those with whom he works in a professional role.

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What are the implications of the foregoing for the deaf professional counselor? Is the question of client/professional social relationships especially relevant to the deaf counselor?

## Recent Developments

To suggest answers for these questions let us consider several recent developments. The past decade, more notably the last five years, has witnessed the rapid expansion in both the quantity and quality of professional counseling services for the adult deaf. The 1965 Vocational Rehabilitation Amendments have made possible even greater expansion of services for the deaf, and the future should see the continued growth of facilities and the number of personnel serving the deaf.

Although counseling as a profession has a well-developed body of theory and practice, and has achieved a certain degree of distinction in the professional world, specialization in counseling with the deaf is a very recent development. There have been counselors serving the deaf for many years, it is true, but counseling has been a proverbial hit-or-miss proposition depending on the skills and competencies of the individual counselor rather than on specialized training. The growing number of university programs providing specialized training in counseling with the deaf, along with a better exchange of ideas among experienced counselors, is resulting in a growing reservoir of knowledge and theory regarding counseling the adult deaf. Through the formation of the Professional Rehabilitation Workers with the Adult Deaf in 1966, professionals working with the adult deaf have given evidence of their strong conviction that professional service with this group of people encounters unique difficulties. Because the PRWAD is a young professional organization, the formulation of a code of ethics has not as yet been accomplished. Thus, we have only conjecture to guide us in considering the question of client/professional outside-the-office relationships in the area of service to the deaf. However, we may turn to theoretical considerations underlying this principle in service to the hearing in order to gain more insight into the problem.

## Theoretical Considerations

In its code of ethics, the American Psychological Association presents its stand in the matter of client/professional relationships with the statement: "The psychologist does not normally enter into a professional relationship with members of his own family, intimate friends, close associates, or others whose welfare might be jeopardized by such a dual relationship" (American Psychologist, 1963). The implication obviously is that such a dual relationship may harm the professional relationship, as well as do harm to the psychologist or his client. This is substantiated by Greenwood (1962), who suggests that such

relationships may be used by both the client and the professional in a manner such as to impair professional authority. The result is a diminution of the professional's effectiveness. Another aspect of the matter concerns the psychological advantage accruing to the professional by the dependent role of the client, which may pose a temptation to the professional in the nonprofessional role.

Parsons (1939) discusses the functional specificity of the professional's authority. According to this concept the professional's authority should be confined to the professional relationship, and should not extend outside his area of professional competence.

Theoretical assumptions underlying the discouragement of client/professional social relationships appear to indicate that the danger lies in possible misuse of authority by the professional, impairment of the professional's judgment through loss of emotional neutrality, and diminution of the professional's authority in the mind of the client.

## Practical Considerations

Do the foregoing theoretical considerations apply to those professionals who work with the deaf? It would not be unreasonable to assume that they are applicable since the dynamics involved have equal application to deaf professionals. However, the opinion has frequently been advanced that serving the deaf is much different from serving the hearing in that professionals who serve deaf people must mingle with them socially to understand their problems. Is this a valid assumption? It does seem that serving the deaf is occasionally made more difficult because of the unique communication problems of the deaf. It is also apparent that we who serve the deaf may gain valuable insights into their difficulties through participation in their social and organizational activities. Still, can we afford to disregard the dangers inherent in these relationships as suggested previously? I believe we cannot. In fact, it seems that the ethical principle discouraging client/professional after-hours relationships has special implications for the deaf professional. Many deaf professionals in the helping professions are leaders in the deaf community, hold offices in organizations for the deaf, and generally are well known by most deaf people in the community. Some deaf professionals have even grown up in the community where they are employed. It therefore seems that most, if not all, deaf professionals are inadvertently forced to engage in nonprofessional activities with their clients.

## Can We Escape the Dilemma?

How is the deaf professional to escape this dilemma? Is this an either/or proposition, with the alternatives either achievement of optimum professional

effectiveness through a limitation of social contacts with the deaf, or a sacrifice of professional effectiveness through a continuation of social participation? To answer this we must consider some of the specific problem situations frequently encountered by the deaf professional counselor.

Each individual develops *role concepts* and *role expectancies* in his relations with others. There are role concepts and expectancies not only for others, but for the self as well. We all play different roles in different situations, and most usually we attempt to assume a role that appears favorable to ourselves and to others. At the same time we develop concepts of the role of others, and from these concepts come role expectancies. We expect certain people to behave in specified ways. In the client/professional relationship these role concepts and role expectancies have implications relevant to our discussion. First, in the social setting where the client-to-be and the professional interrelate, both the client and the professional develop concepts and expectancies regarding the role of the other. Although the client may have a myriad of problems, he attempts to play a favorable role and the professional develops certain expectancies regarding the client. Meanwhile, the client develops expectancies regarding the professional. If the professional happens to be the leader in an organization during the debate of a controversial issue, and the client happens to become at odds with the leader, the client may see the professional as something akin to a dictator and develop hostility toward him. The professional may likewise develop hostility toward the client. This is normal as it were, but when the client has occasion to come to the professional for help in the counseling relationship there are going to be problems. Ideally, the counseling relationship should give the client the opportunity to be himself, to discuss his innermost problems. The counselor has the responsibility of putting aside his emotions and his biases and of giving his undivided attention to the problems presented by the client. When role expectancies unrelated to the professional relationship have been developed by the client or the professional in a social setting, neither may be able to give his full attention to the problem that is pressing the client during the professional relationship. It is difficult for both of them to set aside their role expectancies, especially if they are incongruent.

The preceding examples are a minutia of the problem situations that may result from incongruent role expectancies. Still, they serve to illustrate the difficulties deaf professionals are inviting when they assume dual roles. While it is unrealistic to expect that role expectancies can be completely avoided through the avoidance of all extraprofessional client/professional contacts, difficulties can be considerably diminished by avoiding situations tending to produce client concepts and expectancies detrimental to the counseling relationship.

The present indications are that the deaf professional may encounter difficulties in serving his clients when he establishes outside social relationships

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with them. While it appears that complete avoidance of such relationships is neither practical nor entirely desirable, the deaf professional counselor should give serious consideration to avoidance of situations tending to compromise his effectiveness as a professional.

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