

2nd Edition

Therapeutic Recreation

A Strengths Approach



Lynn Anderson • Linda Heyne

Therapeutic Recreation

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by
Lynn Anderson and Linda Heyne



Second Edition

SAGAMORE  VENTURE

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Dedication

*To our families,
whose love and encouragement have supported our aspirations and
enabled us to reach our goals and dreams.*

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Foreword

One of the most fundamental questions you must ask of yourself as a future professional is “What will be the focus of my professional practice?” What you choose as your focus will determine what you see, what you do, and how you judge your effectiveness. When you first meet a client or program participant, will you see the person’s problems first or their potential? Very importantly, based on what you first see, how will that focus influence your participants’ perceptions of their own capacities and worth? Will you assist participants in their pursuit of a life of happiness, personal growth, and meaning? Will you help build a society where these outcomes are within their reach? Ask yourself also, what are your greatest hopes for your own life? Do you have the same hopes for your participants? If you answered yes to these questions, *Therapeutic Recreation: A Strengths Approach* will be an enormous help to you in acquiring the knowledge and skills necessary to build your own strengths-based therapeutic recreation practice.

Focusing on the facilitation of participants’ strengths as your primary purpose, rather than the amelioration of problems, represents a paradigm shift, a different way of looking at practice, which is occurring in many professions. Historically, many health and human services professionals focused on the remediation of their participants’ problems, believing that problem resolution was the path towards a rich and fulfilling life. True, there have been some individuals who have long argued for a focus on developing human potential. However, it was only two decades ago, when a group of prominent psychologists began to collectively challenge psychology’s narrow focus on the understanding, prevention, and treatment of illness and suffering to the exclusion of the understanding and facilitation of optimal human and societal functioning, a tipping point was reached. Martin Seligman, the leader of this new positive psychology, stated that, “the time has finally arrived for a science that seeks to understand positive emotions, build strength and virtue, and provide guideposts for finding what Aristotle called the ‘good life’” (2002, p. xi). His work sparked the interest and passion of multitudes of scholars and practitioners and has led to a sea change, a transformation, in the way psychologists understand, examine, and facilitate human strength and well-being.

Since the introduction of positive psychology, positive science research has experienced exponential growth and illuminated clearly the importance of positive emotion and experience, the cultivation and expression of personal strengths and virtues, and the connection to something greater than oneself to happiness and well-being. Of equal importance to positive science is understanding and developing the social systems and infrastructure that support the optimization of human potential. Like an avalanche, this paradigm shift in scholarship and practice has grown and expanded to impact the worlds of education, health care, human services, community development, business, government, and many others. The literature in these various fields is a robust, wonderful resource for therapeutic recreation professionals.

While the therapeutic recreation profession has long articulated the value of understanding and appreciating the whole person, including their strengths and limitations, it remains divided in its commitment to focusing professional efforts on facilitating the development and expression of participants’ strengths and positive experiences, rather than ameliorating their problems or deficits. Nevertheless, the field of therapeutic recreation has already been impacted incrementally and significantly by the sea change in health and human services, as well as by the research that emphasizes the centrality of positive emotion, personal growth, and meaning to well-being. The positive science literature and research, as well as therapeutic recreation scholarship, are providing great support, direction, and energy to that commitment to human flourishing. Transformation takes knowledge, action, and time. Interestingly, positive science is discovering also that the same positive emotions, strengths, and life meanings that contribute to well-being prevent many of the problems that have historically been the focus of therapeutic recreation practice.

Articles synthesizing research that supports the vital contributions of positive emotion and the cultivation of strengths to well-being are increasingly present in the therapeutic recreation literature. In 2007, Hood and Carruthers introduced the first therapeutic recreation service model based on positive psychology and strengths-based practice, The Leisure and Well-Being Model, to the profession. Both experienced

practitioners and students new to the field are flocking to conference presentations and workshops that articulate the value of positive emotion and experience (as so often embedded in the leisure experience) in helping participants recover, develop, or move toward a more meaningful life. Therapeutic recreation practitioners and participants alike have been empowered by this new paradigm, providing the impetus for a true transformation of the therapeutic recreation profession.

Therapeutic recreation, with its emphasis on the leisure experience, is ideally situated to use the concepts from positive science to directly impact the quality of life for all members of society regardless of ability or limitation. As Carruthers and Hood (2007) stated:

The goal of [therapeutic recreation] is to build a positive spiral of emotion and action in clients that energizes and empowers them to take on increasingly greater opportunities and challenges in important, valued life domains successfully, further strengthening their positive beliefs, emotions, and capacities. (p. 277)

The Leisure and Well-Being Model (Carruthers & Hood, 2007; Hood & Carruthers, 2007) applied the

concepts and empirical research arising from positive science to the practice of therapeutic recreation. In this book, *Therapeutic Recreation: A Strengths Approach*, Lynn Anderson and Linda Heyne extend the Leisure and Well-Being Model to explicitly articulate therapeutic recreation practices that equally and holistically address environmental interventions that allow participants to flourish through leisure. Students, as well as practitioners, who immerse themselves in this book will be on the cutting edge of positive change in the articulation and delivery of therapeutic recreation services.

It is an exciting time to be engaged in therapeutic recreation practice. This book invites you to focus your professional effort on the empowerment of clients, to see them as reservoirs of hidden potential, and to help them shape their environments so that they can realize their full potential. As Sharry (2004) so eloquently stated, health and human service professionals “are invited to become detectives of strengths and solutions rather than detectives of pathology and problems, and to honor the client’s expertise and capabilities as well as our own” (pp. 8-9). We wish you much joy as you cultivate your capacities in the delivery of strengths-based TR practice. We hope that you find the journey to be meaningful. You are in good hands.

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References

Carruthers, C., & Hood, C. (2007). Building a life of meaning through therapeutic recreation: The Leisure and Well-Being Model, Part I. *Therapeutic Recreation Journal*, 41(4), 276–297. <https://js.sagamorepub.com/trj/article/view/931>

Preface

WELCOME TO HOLLAND

by Emily Perl Kingsley¹

I am often asked to describe the experience of raising a child with a disability—to try to help people who have not shared that unique experience to understand it, to imagine how it would feel. It's like this . . .

When you're going to have a baby, it's like planning a fabulous vacation trip—to Italy. You buy a bunch of guidebooks and make your wonderful plans. The Colosseum. The Michelangelo David. The gondolas in Venice. You may learn some handy phrases in Italian. It's all very exciting.

After months of eager anticipation, the day finally arrives. You pack your bags and off you go. Several hours later, the plane lands. The stewardess comes in and says, "Welcome to Holland."

"Holland?!?" you say. "What do you mean Holland?? I signed up for Italy! I'm supposed to be in Italy. All my life I've dreamed of going to Italy."

But there's been a change in the flight plan. They've landed in Holland, and there you must stay.

The important thing is that they haven't taken you to a horrible, disgusting, filthy place, full of pestilence, famine, and disease. It's just a different place.

So you must go out and buy new guidebooks. And you must learn a whole new language. And you will meet a whole new group of people you would never have met.

It's just a different place. It's slower-paced than Italy, less flashy than Italy. But after you've been there for a while and you catch your breath, you look around . . . and you begin to notice that Holland has windmills . . . and Holland has tulips. Holland even has Rembrandts.

But everyone you know is busy coming and going from Italy . . . and they're all bragging about what a wonderful time they had there. And for the rest of your life, you will say, "Yes, that's where I was supposed to go. That's what I had planned."

And the pain of that will never, ever, ever, ever go away . . . because the loss of that dream is a very, very significant loss.

But . . . if you spend your life mourning the fact that you didn't get to Italy, you may never be free to enjoy the very special, the very lovely things . . . about Holland.

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Most of you who will read this text weren't born when this prose poem was written. You did not witness the pain experienced by families who unwillingly placed their loved ones in institutions for lack of treatment in their communities. You will not know the anguish of parents whose children were prohibited from attending school. Yet among those who faced obstacles were countless individuals whose stories of courage and resilience provided an incubator for this text. The poem selected for the opening page is an artifact of hope, evidence that long before a shift began to occur in the philosophy of treatment by professionals, families were finding their own voices.

The disability rights movement has, for the past 50 years, invited, cajoled, encouraged, and demanded that we recognize the positive force inherent in the energy of change, acknowledging the strengths and capabilities of people with disabilities. That change has healed a social blindness and is now yielding fruit. Much more progress is still needed, but what you can sense in the tentative but loving words of Emily Kingsley is the seed of a deep cultural shift. Each person's life is a gift. The journey through it should be a happy one.

You are about to read a carefully crafted and lovingly prepared text that can teach you to understand the right way of conceptualizing health related services.

Therapeutic recreation, just one of many service disciplines, brings wonderful assets to the table and is the focus of this text. But it is never meant to be seen in isolation, just as leisure is no isolated human need. By the time you work your way through the ideas and strategies offered by the authors and all the sources they have culled for your benefit, I hope you will feel a sense of excitement. You will be continuing the important work of Ms. Kingsley in advocacy and service with the vision of creating inclusive, vibrant communities wherever you work and live.

Incidentally, I was happily surprised that she used recreational travel in the analogy about her child. As I read the poem, thoughts of Holland immediately drew me to those romantic windmills and breathtaking natural carpets of colorful tulips. At the same time, we are intellectually aware of the vulnerability of this low country to flooding. We understand its fragility, but we

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choose to go anyway, to enthusiastically embrace the adventure, to be optimistic and positive.

For those of us with family members who struggle daily to remain healthy, there are challenges, no doubt. On many days the air feels heavy with the mist of acute crises, pain, setbacks, and disappointments. But when the clouds part and we get a good view of the lovely world around us, there is no greater thrill than to be transformed by the journey. You will learn that one of the real treasures of that journey lies in the unique joy nurtured by recreation. Through it we deepen the bonds of family, create precious memories, discover our interests, and express our talents. Recreation intrinsically moves the positive to the forefront. It transforms every environment and experience into a new and exciting venue.

I am profoundly grateful for the commitment made by the authors to this message and the effort they have made to bring knowledge and understanding to us. Our job now, as students and teachers, is to walk with individuals and families as partners in this transformative journey, recognizing that we will change, too, through the positive experience of that very accompaniment.

¹Emily Perl Kingsley is a disability activist and the parent of actor Jason Kingsley, born with Down syndrome in 1974. She was a writer for *Sesame Street* from 1970 until 2015 and has won over 20 Daytime Emmy Awards for her work.

Acknowledgments

We would like to acknowledge the following people who have played a role in the development of this book:

Our mentors and colleagues whose insights and encouragement have inspired our work with the strengths approach in therapeutic recreation

Professionals in the field of therapeutic recreation, many of whom are already using the strengths approach in their practice, and especially those who have contributed Life Stories to this book

Participants in therapeutic recreation services, who have shown us the value of the strengths approach

Last, Katie Caulk (Linda's sister) and Cory Anderson (Lynn's son) for their beautiful artwork throughout the book

About the Authors

Drs. Lynn Anderson, CTRS, CPRP and Linda Heyne, CTRS have worked and studied in the field of therapeutic recreation for over 45 years. During those years, we have seen the field evolve, grow, and change. Involvement in that evolution led to our desire to write this book about a strengths approach in therapeutic recreation.



Dr. Lynn Anderson is a distinguished service professor in the Recreation, Parks, and Leisure Studies Department at the State University of New York at Cortland (SUNY Cortland). She is also the director of the Inclusive Recreation Resource Center, whose mission is to help people of all abilities play wherever they choose. Lynn is a fellow in the Academy of Leisure Sciences and a Distinguished Fellow in the National Academy of Recreational Therapy. Lynn has contributed numerous publications and presentations in the field and served in editorial roles with several journals. She has served as director of the Rural Recreation Integration Project, promoting inclusion through training and technical assistance in rural areas. She also worked with Wilderness Inquiry, an award winning adventure-based company that provides opportunities for wilderness experiences for people of all abilities. Lynn worked for several years as a certified therapeutic recreation specialist in a regional medical facility, serving people in psychiatry, addiction, pediatric, and physical rehabilitation programs. She has served on numerous boards for non-profit agencies that serve people with disabilities, including adaptive sports, advocacy, and community-based services. Through her work and research, Lynn has used a strengths approach, focusing on the dreams people have, and how strengths and resources can be mobilized to reach those dreams through the leisure experience. She loves to recreate with her husband, Dale, her children, Kelly and Cory, their spouses, and the grandchildren, pursuing passions like snowboarding, windsurfing, backpacking, kayaking, cross-country skiing, and other outdoor adventures.



Dr. Linda Heyne is a professor in the Department of Recreation and Leisure Studies at Ithaca College in the Finger Lakes region of New York State. Along with her commitment to promote strengths-based practices in therapeutic recreation, her scholarly interests are inclusive recreation, school-based therapeutic recreation, sustainable tourism, and an international perspective on the use of recreation for therapeutic intent. She has authored many articles and chapters, as well as delivered national and international presentations, on these topics. She has reviewed manuscripts for various journals in the field and been a long-standing associate editor for the *Therapeutic Recreation Journal*. As a certified therapeutic recreation specialist, Linda helped found the inclusive recreation program at the St. Paul Jewish Community Center, which won several awards for its early inclusionary practices. In this capacity, she served on several community boards of directors and consulted nationwide to assist other agencies to adopt inclusion techniques and processes. Linda is also a Fulbright Specialist. She has been a resident professor at the Ithaca College London Center, a visiting scholar at Breda University in The Netherlands, and a frequent instructor at the International Summer School for Wellbeing at HAMK University in Hämeenlinna, Finland. She collaborates with Ruta Verde in Costa Rica to sponsor study abroad trips for students to learn how sustainable tourism practices contribute to the well-being of remote, rural communities. Linda enjoys her favorite leisure activities with family and friends, including walking, hiking, gardening, playing music, dancing, and traveling to international destinations.

Part I

Foundations of a Strengths-Based Approach to Therapeutic Recreation

Part I sets the stage for strengths-based practice. It examines where we've been and where we're going in therapeutic recreation, recreation, health, and human services.

"Deep in their roots all flowers keep the light."

Theodore Roethke, American poet



The Black-Eyed Susan signifies strength, positivity, and happiness.

Part I Overview



Chapter 1

Introduction

This chapter familiarizes you with the strengths perspective, the need for this book, and the special learning features we use.



Chapter 2

Paradigm Shifts—A Sea Change in Health and Human Services

A large and deep paradigm shift toward strengths is transforming health and human services. We describe it here on several levels—biological, psychological, sociological, and philosophical.



Chapter 3

A Sea Change in Therapeutic Recreation

Therapeutic recreation is a part of the paradigm shift in health and human services. We reinterpret therapeutic recreation as a strengths-based profession.



Chapter 4

The Flourishing through Leisure Model: An Ecological Extension of the Leisure and Well-Being Model

In this chapter we share the Flourishing through Leisure Model: An Ecological Extension of the Leisure and Well-Being Model, based on the Leisure and Well-Being Model originally proposed by Hood and Carruthers (2007).



Chapter 5

Strengths—At the Heart of Therapeutic Recreation

Here you'll learn what we mean by strengths: internal strengths, external strengths, and leisure as a strength to enhance well-being and quality of life.



Chapter 6

Theories that Guide Strengths-Based Therapeutic Recreation

We explain new and long-standing psycho-social theories that support strengths-based practice. Learn the reasons behind what we do in therapeutic recreation and why it is so important and effective.



Chapter 7

Principles that Guide Strengths-Based Therapeutic Recreation

This final foundational chapter distills the previous chapters into principles to guide you in your strengths-based practice.

Chapter 1

Introduction to Therapeutic Recreation: A Strengths Approach



*The tulip emerges early in the spring—
a harbinger of slow, deep change.*

“Courage is not the towering oak that sees storms come and go; it is the fragile blossom that opens in the snow.”

—Alice M. Swaim, American author

OVERVIEW OF CHAPTER 1

- Introduction to the strengths perspective
- Overview of the book content
- Overview of the learning features in the book
- Introduction to critical thinking, cultural competence, and the use of evidence-based practice as part of the competencies needed in therapeutic recreation in the 21st century

FOCUS QUESTIONS

- How does this book address a gap in the therapeutic recreation literature? In what ways is the approach different from past practices?
- What is cultural competence, and why is it important to develop?
- What is critical thinking and evidence-based practice, and why are these important?

INTRODUCTION TO THE STRENGTHS APPROACH

We grow up in a culture so ingrained in a certain way of thinking that we rarely are aware of that thought process and how it permeates all we do. In our society, one of those ingrained perspectives is the problem-oriented approach, which we apply to many situations in life. The small body of research that has looked at this issue shows that there is little relationship between

being clear on the problem and finding viable solutions, yet we continue to feel we must start with what is wrong, not what is right or what we want to see happen. Imagine a world where we start with strengths, not problems, when we feel a desire to make positive change. Imagine our work if we focus on strengths when we want to increase any indicator of success, whether it be productivity, creativity, or other desired outcomes. Imagine a world where we look at helping other people by starting with their strengths, goals, and aspirations, not their problems. Instead of focusing on what is wrong, imagine a world where we focus on what is aspired to, what is dreamed about, and what is going well.

Slowly, other professions that help people and communities are reorienting themselves to this strengths perspective. New research in brain functioning provides concrete evidence that a positive orientation is far more effective. Therapeutic recreation, as a profession, has often touted itself as focusing on strengths in its practice approach. Yet our literature, though it talks about therapeutic recreation as the strengths profession, ends up in the familiar problem-oriented approach. The focus of assessments is to find needs and problems, the plan is grounded by a list of problems or needs, documentation is problem-oriented, and interventions are designed to address problems or deficits. Even though strengths are used as a tool to help people, they are not the focus of the therapeutic recreation process in most texts in our field.

We hope this book will address this gap in the therapeutic recreation literature. The book is based on the premise that the role of therapeutic recreation is to help people identify goals and aspirations (what they see as possibilities, what they want to have happen), and their accompanying talents, assets, interests, and capacities. We also see therapeutic recreation as identifying family, neighborhood, and community resources to support people in achieving their goals. Using a strengths approach, therapeutic recreation specialists help people

link their aspirations to resources and supports, and they help them establish plans to reach their dreams. This approach is grounded in the idea that “goals related to problems” are not necessarily “goals related to solutions” in people’s lives. Solutions are what people *want* to have happen, versus problems, which are what people *don’t want* to have happen. Our hope is that the book will provide a healthy corrective to the entrenchment of our profession, and our society as a whole, in the ubiquitous problem-oriented approach we use almost without thinking.

Here is a challenge to you! Pay mindful attention over the next week, and see if you can increase your awareness of the extent to which your daily life, the institutions with which you interact (e.g., work, school, the nation, and even the world), are enmeshed in the problem-oriented approach. See if you can identify how often we start with what is wrong to improve a situation. See if you can envision a world where we focus on solutions, aspirations, and dreams to improve a situation! Perhaps the world, the nation, our neighborhoods, and our families could move more quickly to where we want to be if a strengths orientation is followed.

Here is an example, in one community, of the strengths approach at work. In a crime-ridden residential street in one of the worst neighborhoods in this city, someone, during the middle of the night, put green wooden chairs in the front lawn of every house. This person was using a strengths approach in trying to make this neighborhood a friendlier, safer place. The chair-dropping act inspired many community residents, who came out, talked to each other for the first time in years, and resolved to be out in their yards a lot more. It is hard to be a criminal in a neighborhood when a hundred witnesses are out watching!

OVERVIEW OF THIS BOOK

Therapeutic Recreation: A Strengths Approach is divided into three main sections. In Part 1, we provide you with a foundation of the strengths approach. Chapter 1, *Introduction*, provides the framework and strategies for learning used throughout the book. Chapter 2, *Paradigm Shifts*, sets the stage for the sweeping changes occurring in recreation, health, education, and human service systems. Social indicators and scientific support for the shift to a strengths-based approach are also presented. Chapter 3, *A Sea Change in Therapeutic Recreation*, explores how the shift to a strengths-based ecological approach fits into recreation therapy practice, and how therapeutic recreation can flourish as a

profession in the paradigm. Chapter 4, *The Flourishing through Leisure Model: An Ecological Extension of the Leisure and Well-Being Model*, introduces you to a model of therapeutic recreation practice that is based on the strengths perspective. Chapter 5, *Strengths*, provides you with a structure and vocabulary to look closely at and understand strengths relevant to the practice of recreational therapy. Chapter 6, *Theories*, provides an introduction to theories that guide a strengths perspective and are relevant to therapeutic recreation. Finally, Chapter 7, *Principles*, overviews some fundamental guidelines for a strengths-based approach, which emanate from theory and philosophy.

Part 2 is the mainstay of this book. This section looks at the application of the strengths perspective to the therapeutic recreation process: assessment, planning, implementation, and evaluation, with documentation woven through all four phases of the process. In Chapter 8, *Collaborative Practice*, we help you understand the importance of collaboration in the therapeutic recreation process, the role of the participant and family in collaboration, and the roles of other professionals with whom you will work in the helping relationship. Chapter 9, *Assessment*, provides you with a way to think about and conduct assessment from a strengths perspective to ensure authentic and meaningful practice. Chapter 10, *Planning*, examines the link between assessment and planning, and the principles and practice of planning. Chapter 11, *Implementation*, provides an overview of common interventions in therapeutic recreation, applied from a strengths perspective. Chapter 12, *Transition and Inclusion*, provides a strengths approach to helping participants terminate your services and continue to pursue a meaningful, fully engaged life in their communities. Finally, Chapter 13, *Evaluation and Documentation*, describes the processes you will use in therapeutic recreation to document and evaluate the services you provide.

Part 3 of the book helps you as a professional establish and maintain yourself as a strengths-based therapeutic recreation specialist. Chapter 14, *Advocacy*, provides a framework and guidelines for advocating the strengths perspective, as well as advocating on behalf of the participants with whom you work. Chapter 15, *Building Your Strengths as a Therapeutic Recreation Specialist*, stresses the importance of being well prepared in therapeutic recreation, from credentialing to clinical supervision to continuing education. And last, Chapter 16, *Looking Ahead*, helps you put what you learn in this book into the context of your life as a professional in therapeutic recreation.

CHAPTER STRUCTURE

Each chapter in this book is structured to facilitate your learning of important concepts. As you read through each chapter, you will find each of the following sections:

- **Overview**—Provides a brief, bulleted outline of what the chapter will contain
- **Focus questions**—Offers questions that will help focus your reading on important or main points
- **Chapter content**—Divides the content into manageable sections to help you learn the material more effectively
- **Summary checklist**—Ends each chapter with a summary of the main points
- **Self-assessment of learning**—Asks you questions to help you assess your own understanding of what you read in the chapter, or provides exercises to help you apply the content to your own life
- **Resources**—Lists websites, workbooks, assessment tools, and other resources that help you apply the information in the chapter, or learn the material in more depth
- **References**—Allows further and deeper study in the content areas of the chapter and encourages you to access primary source materials

CHAPTER FEATURES

The chapters in this book also contain four different features to help you understand and apply the strengths approach in recreation therapy practice. The consistent use of icons will alert you to the features as you encounter them in each chapter. Each feature is described below.

1. Compare/Contrast

Because we are helping you learn a new way to think about and conceptualize therapeutic recreation, we provide frequent opportunities for you to compare and contrast the strengths approach to the commonly used deficits approach, so you may understand the differences more clearly.

The exercise of comparing and contrasting will encourage you to develop your critical thinking skills,



essential for therapeutic recreation specialists in the 21st century (O'Neil & PHPC, 1998). Scriven and Paul (2007) defined critical thinking as:

Critical thinking can be seen as having two components: 1) a set of information and belief-generating and processing skills; and 2) the habit, based on intellectual commitment, of using those skills to guide behavior. It is thus to be contrasted with: 1) the mere acquisition and retention of information alone, because it involves a particular way in which information is sought and treated; 2) the mere possession of a set of skills, because it involves the continual use of them; and 3) the mere use of those skills (“as an exercise”) without acceptance of their results (para. 5).

Table 1.1 provides an overview of the kinds of questions you can ask yourself to ensure you are using critical thinking skills.

Rao et al. (2006) further defined the critical thinking skill of **comparing and contrasting** as the process of looking at similarities and differences to reveal important characteristics of each concept or idea. When we compare and contrast, we are able to see more clearly the important factors within each concept, see patterns, and draw informed conclusions. Comparing and contrasting, because it is often based on at least one concept with which we have familiarity, leads to a deeper understanding of what is being learned and discovered. Each chapter will provide opportunities for you to compare and contrast the strengths and deficits approach to working with people, in the context of the subject matter of that particular chapter.

2. My Cultural Lens

Each chapter in this book will provide you with opportunities to develop your own awareness and competence when working with people from diverse backgrounds. By the year 2060, those groups in the United States now considered minorities will be the majority. The largest growth in these population groups will occur as a result of immigration from another country, and likely another culture (U.S. Census Bureau, 2015). In therapeutic recreation, you will work with people from a variety of racial, religious, and cultural backgrounds. In order to be effective in your work in therapeutic recreation, it is imperative to develop cultural competence.



Table 1.1
Developing Critical Thinking Skills

| Ask yourself these questions throughout your daily practice to hone your critical thinking skills: | | |
|--|---|---|
| Who? | ... benefits from this? ... is this harmful to? ... makes decisions about this? ... is most directly affected? | ... have you also heard discuss this? ... would be the best person to consult? ... will be the key people in this? ... deserves recognition for this? |
| What? | ... are the strengths/weaknesses? ... is another perspective? ... is another alternative? ... would be a counter-argument? | ... is the best- /worst- case scenario? ... is most/least important? ... can we do to make a positive change? ... is getting in the way of our action? |
| Where? | ... would we see this in other settings? ... are there similar situations? ... is there the most need for this? ... would this be a problem? | ... can we get more information? ... do we go for help with this? ... will this idea take us? ... are the areas for improvement? |
| When? | ... is this acceptable/unacceptable? ... would this benefit our participants? ... would this cause a problem? ... is the best time to take action? | ... will we know we've succeeded? ... has this played a part in our history? ... can we expect this to change? ... should we ask for help with this? |
| Why? | ... is this a problem/challenge? ... is it relevant to me/others? ... is this the best- /worst-case scenario? ... are people influenced by this? | ... should people know about this? ... has it been this way for so long? ... have we allowed this to happen? ... is there a need for this today? |
| How? | ... is this similar to _____? ... does this disrupt things? ... do we know the truth about this? ... will we approach this safely? | ... does this benefit us/others? ... does this harm us/others? ... do we see this in the future? ... can we change this for our good? |

Cultural competence is defined as being able to work effectively with cultures other than your own by using a set of behaviors, attitudes, and policies that are congruent with that culture (Cross et al., 1989). To break this down further, “culture” refers to integrated patterns of human behavior that include the language, thoughts, actions, customs, beliefs, and institutions of racial, ethnic, social, or religious groups. “Competence” implies having the capacity to function effectively as an individual or an organization within the context of the cultural beliefs, practices, and needs presented by people and their communities (American Association of Medical Colleges, 2005; Cross et al., 1989).

To become a culturally competent therapeutic recreation specialist, you must work through stages of development and be aware of where you are in those stages, as well as where your agency is. According to King et al. (2007) and Williams (2001), there are five stages of cultural competence development, along a continuum:

1. **Cultural destructiveness**—This stage is the most negative of the continuum, where attitudes, behaviors, policies, and practices are destructive or harmful to people and their cultures.
2. **Cultural incapacity**—In this stage, the individual or agency does not mean to be destructive to others and their cultures but does not have the capacity or awareness to meet different cultural needs.
3. **Cultural blindness**—At the midpoint of the continuum, the professional or agency provides services with the expressed intent of being unbiased. They function as if the culture makes no difference and all the people are the same. This stage is sometimes called “color blindness.”
4. **Cultural pre-competence**—Individuals and organizations move toward the positive end of the continuum by

acknowledging cultural differences and making documented efforts to take them into consideration.

5. **Cultural competence**—At the positive end of the continuum, competence is indicated by the following practices:

- acceptance and respect of cultural differences
- continual expansion of cultural knowledge
- continued cultural self-assessment
- attention to the dynamics of cultural differences
- adoption of culturally relevant service-delivery models to better meet needs

Cultural humility is a way of approaching cultural competence. It is a “lifelong commitment to self-evaluation and critique, redressing power imbalances in the helping relationship, and developing mutually beneficial and non-paternalistic partnerships with communities” (Tervalon & Murray-Garcia, 1998, p. 123). Where cultural competence implies some endpoint, cultural humility asks us to keep learning about others throughout our lives.

Our intent in each chapter, through the “My Cultural Lens” exercises, is to provide an opportunity for you to begin to develop an awareness of your cultural competency level and to make steps toward developing that level further. Our intent is also to stimulate you to pursue further experiences, training, and education that will develop your cultural competence and cultural humility over your lifetime. Here is your first “My Cultural Lens” exercise (see Figure 1.1).


3. Primary Source Support

Each chapter will provide you with an opportunity to delve into original research that supports information provided in the chapter. In a pull-out box, we will provide the primary reference, a summary of the research, and its results. By encouraging you to read and understand research, you will be on the path toward using evidence-based practice in the field of therapeutic recreation.

Evidence-based practice is a competency you will need to be effective in providing recreational therapy services (O’Neil & PHPC, 1998; Pegg et al., 2017; Shank &



Figure 1.1
My Cultural Lens: Meanings of Leisure



**My Cultural Lens:
Meanings of Leisure**

Yoshita Iwasaki and colleagues (2007) wrote a compelling reflection on the dominance of Western thought and terminology in global leisure research. They noted that the terms “leisure,” “recreation,” and “physical activity” do not have equivalent translations in Eastern languages and that the rough translations do not have the same intended meanings as how these terms are used in research studies and in the field. They argue that if we want to understand non-Western ideas of leisure-like phenomena, we should use a “life story” approach. In this approach, we would use prompts like “Tell us about your life” instead of “Tell us about your leisure and recreation.” Iwasaki’s premise is that in sharing their life story, people will share their leisure-like experiences, but through their own cultural lens.

What is your definition of leisure and recreation? Would you describe your leisure as a part of describing your life story? Would your friends from other cultural backgrounds describe their leisure-like experiences differently than you do? How would they describe them?

Coyle, 2002; Stumbo & Peterson, 2018). **Evidence-based practice** is the integration of your individual practice experience with the best available external evidence when you are helping participants make decisions and implement plans for their leisure and well-being. For participants, using evidence-based practices means they can be confident that the therapeutic recreation services they receive meet the guidelines of best practices and are outcome-focused.

Evidence-based practice is based on systematic research results, data collected by your own agency, and judgments made by the participant and you. A key part of evidence-based practice is reading research on an ongoing basis and applying effective interventions from research into your own practice. Thus, the “Primary Source Support” feature is intended to help you not only get comfortable with the journals and research results available to you, but to expose you to new and relevant research findings from a variety of fields that have immediate application to a strengths-based approach in therapeutic recreation. Here is your first “Primary Source Support” feature (see Figure 1.2).


4. Life Stories

“Life Stories” are provided in many chapters to bring key concepts “to life.” By hearing the stories of how individuals have used a strengths approach in their lives or how



Figure 1.2


Primary Source Support: An Example of Evidence-Based Practice



Primary Source Support: An Example of Evidence-Based Practice

Janssen, M. (2004). The effects of leisure education on quality of life in older adults. *Therapeutic Recreation Journal*, 39(3), 275–288.

Janssen (2004), by using an experimental design, studied the effects of a 6-week leisure education program on the perceived quality of life of older adults who resided in residential-style retirement facilities. The theory of quality of life, which guided the research and intervention, states that there is more to life than absence of illness, and that people's perceptions about whether they can enjoy the important possibilities in their lives across multiple domains will determine their sense of life satisfaction and well-being. Leisure is an important life domain that contributes to quality of life. In this study, Janssen facilitated a leisure education program that focused on leisure appreciation, awareness of self in leisure, self-determination in leisure, making decisions regarding leisure participation, knowledge and utilization of leisure resources, and leisure and quality of life. The results of the study showed that those older adults who participated in the leisure education program had higher levels of perceived quality of life (measured with the Quality of Life Profile) than those who did not participate. The older adults who received leisure education from the therapeutic recreation specialist felt they were better able to get out with others, pursue their hobbies, participate in indoor and outdoor recreation activities, and socialize with family and friends. All these factors contributed to a higher quality of life. Janssen provides a strong rationale for the connection between leisure education, self-determination, control, and quality of life.



professionals have used the strengths approach in services, the concepts become more real and easier to understand. As authors, we have consciously avoided using the term “case” study or “case” story. A case is often conceptualized as a problem needing to be fixed, or a depersonalized collection of facts about a person. The phrase “life stories,” on the other hand, conveys a sense of discovery about the humanness of another person, and what can be learned from her or his story. Some life stories we provide are based on real people we have met or with whom we have worked, while others have been provided to us by therapeutic recreation specialists working in the field, and still others come from current events, published research, or even the popular media. Some are about individual people, and others about agencies or systems.

In sum, the content and structure of this book will help you on the path to developing the competencies and ways of thinking you need to be effective in the therapeutic recreation field. The Pew Health Commission, in a seminal report in 1998, outlined those basic competencies. In Table 1.2, we have provided the list of the 21 competencies identified in exhaustive study and discussion over a 10-year period. Though focused more exclusively on “health care,” the competencies have relevance to the delivery of all human services and have stood the test of time. The Institute of Medicine (2003) and the World Health Organization (2005) reaffirmed these competencies and distilled five core competencies from the list: person-centered care, collaboration, evidence-based practice, quality improvement, and information technology usage.

Table 1.2

Pew Health Commission's Competencies for the 21st Century (O'Neil & PHPC, 1998)

1. Embrace a personal ethic of social responsibility and service.
2. Exhibit ethical behavior in all professional activities.
3. Provide evidence-based interventions.
4. Use a broad definition of health (multiple determinants).
5. Apply knowledge of the new sciences (such as brain research).
6. Use critical thinking, reflection, and problem-solving.
7. Understand the role of primary care (sustained partnerships in the context of family and community).
8. Help people and communities promote and protect their health.
9. Adopt a population-wide perspective on services.
10. Improve access to services for all people in a community.
11. Be relationship-centered when providing services for individuals and their families.
12. Provide culturally sensitive services.
13. Partner with communities and support choice and self-determination.
14. Use information and communication technologies effectively and appropriately.
15. Work in teams and across disciplines collaboratively.
16. Ensure services that balance individual, professional, system, and societal needs.
17. Practice leadership—develop partnerships and alliances across systems.
18. Take responsibility for quality—be accountable for your own competence and performance.
19. Help improve the quality of services at all levels— understand and use quality improvement and evaluation processes.
20. Be an advocate for policy that promotes and protects the health of the general public.
21. Continue to learn and grow; mentor and help others learn in your profession.



Self-Assessment of Learning

The “Assessing Your Experience with Other Cultural Groups” assessment is provided here to help you along the continuum of cultural competence. Take a moment to complete the self-assessment, and then share it with another student or co-worker. What did you learn about yourself and your environment? Where do you feel you are in your development of cultural competence?

Assessing Your Experience with Other Cultural Groups (Adapted from Fleming & Towey, 2002, pp. 48–49)

People form impressions of others who are from different racial or ethnic groups than their own either by direct interactions or by indirect avenues, such as reading and the media. Interpersonal experiences with people from other cultural groups may exert a powerful influence on your comfort level as you interact with people from backgrounds that differ from your own.

Consider your early life with respect to school, recreation, neighborhood, religion, or other formative experiences. Think about the intensity of those experiences as they related to interactions with other cultural groups and rate them for each life area below.

When you have completed your ratings, add them together—the higher your score, the more direct interactions you have had with people who are different from you. Think of ways you can increase your score right now by increasing your interactions with people from other cultural groups.

| Experience | Intensity | | |
|----------------------|----------------|-----------------|------------------|
| | Limited (1) | Moderate (2) | Extensive (3) |
| Early school years | | | |
| Recreation/leisure | | | |
| Neighborhood | | | |
| Sports/athletics | | | |
| Music, theater, film | | | |
| College | | | |
| Work | | | |
| Travel | | | |
| Religion | | | |
| TOTAL: | | | |

List specific situations that created uncertainty or discomfort.

List situations that were enjoyable. Include references to food, music, dancing, and other leisure.

Through your active engagement with the material in this book, we hope you will gain a deeper knowledge of how to practice in the therapeutic recreation profession in ways that provide meaningfulness to you and to the people with whom you work. Using a strengths approach—focusing on broadening and building assets in natural settings—will have a profound and positive impact not only on the people with whom you work, but on yourself as well. Your passion for therapeutic recreation will grow, and you will be capable of doing the good you entered the profession to do. Enjoy your journey!

SUMMARY CHECKLIST

Chapter 1 included the following main ideas:

- An overview of the strengths perspective
- An overview of the content and structure of this book
- An introduction to the learning features in this book
- A definition of critical thinking skills
- A definition of cultural competence
- A definition of evidence-based practice and habits of using it

RESOURCES

Agency for Healthcare Research and Quality

A part of the U.S. Department of Health and Human Services, the Agency for Healthcare Research and Quality has as its mission the improvement of healthcare services for all. The website is a clearinghouse of research results that document evidence-based practice, across populations and settings. New research findings on topics from rural health to disability to health promotion are summarized each month. You can sign up for e-mail alerts, stay on top of cutting-edge research, and download podcasts on a wide variety of topics.

Cochrane Reviews

Cochrane Library is a nonprofit entity that compiles evidence-based practice reviews from the health and human services professions. The reviews summarize the best evidence on outcomes to help professionals make informed decisions in their practice. The website is easily searchable by keywords and provides a great starting point for your goal to provide evidence-based services.

The Health and Medicine Division of the National Academy of Sciences, Engineering, and Medicine

Formerly the Institute of Medicine, the Health and Medicine Division (HMD) is an arm of the National Academy that focuses on studying health and medicine to provide advice, analysis, and expertise to federal and independent agencies. Its studies, reports, forums, and other resources have facilitated cross-disciplinary thinking about the current and future state of health and medicine. On the website, you will find many of its seminal reports to guide your work as a recreation therapist.

National Center for Cultural Competence

Housed at Georgetown University, the National Center for Cultural Competence is focused on helping agencies and individuals improve cultural competence. The Center works within health care, human service, education, and advocacy systems. On its website, you will find numerous tools and resources to help you assess and improve your own cultural competence.

Think Cultural Health

As a part of the U.S. Department of Health and Human Services, Think Cultural Health is a website that features information, continuing education opportunities, resources, and more for health and health care professionals to learn about culturally and linguistically appropriate services, or CLAS. The website provides the CLAS standards and education and resources to implement those standards in practice.

REFERENCES

- American Association of Medical Colleges. (2005). *Cultural competence education*. AAMC.
- Cross, T., Bazron, B., Dennis, K., & Isaacs, M. (1989). *Towards a culturally competent system of care* (Vol. I). Georgetown University Child Development Center, CASSP Technical Assistance Center.
- Fleming, M., & Towey, K. (2002). *Delivering culturally effective health care to adolescents*. American Medical Association.
- Institute of Medicine. (2003). *Health professions education: A bridge to quality*. National Academies Press.
- Iwasaki, Y., Nishino, H., Onda, T., & Bowling, C. (2007). Leisure research in a global world: Time to reverse the Western domination in leisure research? *Leisure Sciences*, 29, 113–117. <https://doi.org/10.1080/01490400600983453>
- Janssen, M. (2004). The effects of leisure education on quality of life in older adults. *Therapeutic Recreation*

- Journal*, 39(3), 275–288. <https://js.sagamorepub.com/trj/article/view/992>
- King, M. A., Sims, A., & Osher, D. (2007). *How is cultural competence integrated into education?* Center for Effective Collaboration and Practice. http://cecp.air.org/cultural/Q_integrated.htm#def
- O’Neil, E., & Pew Health Professions Commission (PHPC). (1998). *Recreating health professional practice for a new century*. Pew Health Professions Commission.
- Pegg, S., Stumbo, N., & Bennett, J. (2017). Evidence-based practices. In N. Stumbo, B. Wolff, & S. Pegg (Eds.), *Professional issues in therapeutic recreation: On competence and outcomes* (3rd ed., pp. 333–356). Sagamore-Venture.
- Rao, M., Shafique, M., Faisal, K., & Bagais, A. (2006). Infusing critical thinking skill compare and contrast into content of data structures course. *Proceedings of International Conference on Frontiers in Education: Computer Science and Computer Engineering*. <https://eprints.kfupm.edu.sa/14851/>
- Scriven, M., & Paul, R. (2007). *Defining critical thinking*. <http://www.criticalthinking.org/about/center-forCT.cfm>
- Shank, J., & Coyle, C. (2002). *Therapeutic recreation in health promotion and rehabilitation*. Venture Publishing, Inc.
- Stumbo, N., & Peterson, C. (2018). *Therapeutic recreation program design: Principles and procedures* (5th ed.). Sagamore-Venture Publishing.
- Tervalon, M., & Murray-Garcia, J. (1998). Cultural humility versus cultural competence: A critical distinction in defining physician training outcomes in multicultural education. *Journal of Health Care for the Poor and Underserved*, 9(2), 117–125. <https://doi.org/10.1353/hpu.2010.0233>
- U.S. Census Bureau. (2015). *New Census Bureau report analyzes U.S. population projections*. <https://www.census.gov/newsroom/press-releases/2015/cb15-tps16.html>
- Wasabi Learning. (2020). *Critical thinking: Tips, insights and systems for inspiring deep thought and reflection*. <https://wabisabilearning.com/blogs/critical-thinking>
- Williams, B. (2001). Accomplishing cross-cultural competence in youth development programs. *Journal of Extension*, 39(6). <http://www.joe.org>
- World Health Organization. (2005). *Preparing a health care workforce for the 21st century: The challenge of chronic conditions*. World Health Organization.