

Caratteristiche del Disability Manager in qualità di Educatore Professionale

Characteristics of Disability Manager as a Professional Educator

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Abstract

The paper has the aim to assess the role that the figure of the professional educator is able to perform in a system that handles disability in performant and educational way. This implies the need to insert the educator in a management model capable of developing a new cultural approach aimed to the inclusion and exploitation of disabled people in society. The study leads to the conclusion that recognize themselves in the professional educator, thanks to his baggage multidisciplinary training, the skills appropriate to pursue the education and socio-economic benefit sought through the model of disability management.

Keywords

Professional Educator; Disability, Inclusion, Disability Management; Disability Manager.

Introduction

Disability, to date, is one of the main social, health and economic problems worldwide. It's estimated that more than a billion people in the world lives with some form of disability. At least one-fifth of them, approximately 200 million individuals, suffers from severe disabilities, and so it is forced to face a number of significant difficulties and problems in everyday life. In addition, the percentages of disability in the world are constantly increasing due to the progressive aging of the population and the consequent increasing number of individuals suffering from chronic-degenerative diseases (WHO, 2011; OECD, 2007). From the need to face this important problem, an innovative approach has developed, defined as disability management, it is aimed at improving the life quality of subjects with disabilities, through the implementation of the management principles and rules of the typical economic and industrial sectors. (Di Palma & Tafuri, 2016; Di Palma, Raiola & Tafuri, 2016). It is explained in the proposal of social and corporate action programs and policies supporting a strategic and organizational system to promote social, territorial, economic and work inclusion of these individuals (Angeloni, 2011). In this line of action, there is still a fundamental issue to be solved: who can play the role of disability manager, or better, who has the right skills and education background to approach disability, with the aim of enhancing disabled resources and making them as more autonomous and productive as possible? As an answer to this research question, this work proposes the figure of the professional educator who, thanks to his multidisciplinary culture, appears to be the most appropriate professional to cover the delicate and important role of disability manager. In fact, he has the ability to organize and manage his own activities in a coordinated and integrated way with other professionals, in order to favor the inclusion of disabled people, also through their direct involvement with their families and with the community in general.

1. The role of professional educator

In order to carry out a research analysis aimed at understanding the potential of the professional educator in the management of disability to pursue social, cultural and consequently economic benefits, it is important, albeit in a synthetic way, to outline the peculiarities that characterize this professional figure. First of all, in Italy, the professional figure of the educator can be divided into two types (Cardella, 2007, Crisafulli et al., 2010): • The socio-pedagogical Professional Educator who is trained in the Faculties of Education Sciences, in order to operate in various types of socio-educational projects and services; • The socio-health Professional Educator who is trained in the Faculty of Medicine, or in Inter-Faculty Courses, enabling him to work in the field of rehabilitation health professions. Unlike the other European countries, the Italian situation is anomalous for this dual training channel generated with the M.D. No. 520 of the Ministry of Health dated October 8, 1998, which defined the profile, skills and requisites of the health educator who belongs to the rehabilitation health professions. Specifically, in fact, the training phase, due to sector-specific legislative interventions, is carried out in two degree classes:

Department of Medicine and Surgery, undergraduate or 1st level degree course in the sector SNT/ 02 (Rehabilitation Health Profession Science): Degree classes in Rehabilitation Health Professions, where the qualification of Professional Educator is obtained and framed at the VI level of the EQF or QEQ (all three-year degrees) • Department of Human Sciences, undergraduate or 1st level degree course in the sector L 19 (Education Sciences): Degree Classes in Education Sciences; thanks to which to become a socio-pedagogical professional educator or social educator. Article 3 of the Ministerial Decree 520/98 also includes that universities provide training through the Departments of Medicine and Surgery in conjunction with the faculties of psychology, sociology and education sciences, proving the strong multidisciplinary component that characterizes this study path. Furthermore, the training includes professional

courses held in the health structures of the National Health Service, and in the social-health assistance structures of public bodies, identified in the memoranda of understanding between the regions and the universities themselves. Finally, according to Law No. 240/0 for the Executive Functions, after the three-year degree, a subject can continue the university career with a second level degree (Master's degree), divided into two types too: 1. Department of Medicine and Surgery, Master's Degree Course - sector SNT / 02 (Rehabilitation Health Profession Science) in Specialized Health Educator, in which, always at the Community level, it is framed at the VII level of the EQF or QEQ. 2. Department of Human Sciences, Master's Degree Programs - sectors 50 (School Leadership and Clinical Pedagogy), 57- 85 (Adult and Continuing Education and Sciences of Pedagogy), and 93 (E-Learning and Media Theories and Methodologies), in order to be classified at the VII level of the EQF or QEQ. This professional figure, once trained, has the possibility of working in a series of different areas of intervention. In fact, thanks to a multidisciplinary cultural base, he can (brandani, 2006; Cardella, 2007; Cardini & Molteni, 2003; Crisafulli et al., 2010): • Manage, plan and assess educational interventions aimed at the recovery and development of the potential of those in difficulty, in order to let them achieve increasingly advanced levels of autonomy; • Promote and organize social and health facilities and resources, in order to implement an integrated educational project; • Organize, plan, manage and verify their professional activities within socio-health services, socio-health-rehabilitative and socio-educational structures, in a coordinated and integrated way with other professional figures that work in those structures, with the direct involvement of interested subjects and/or their families, groups and the community; • Operate on the families and on the social context of the patients, in order to favor their reintegration in the community; • Take part in studies, research and documentation activities aimed at the purposes listed above. It is precisely the organizational and management peculiarities integrated with the social, educational and inclusion purposes of the "less strong and autonomous" subjects, just like the disabled people, that have stimulated the assessment of this professional figure as a disability manager.

2. Educational model to manage the disability

In order to investigate the research question of this paper, i.e. if and what role the professional educator can assume in the innovative management model of disability, it is essential to specify what is meant by disability management. Disability management takes shape from the need to reconcile the right to include disabled and chronically ill persons with the enterprises' efficiency needs. It was theorized, for the first time in the Eighties, within various economic-management and organizational disciplines, and is prevalently spread in Canada, the USA and some Northern European countries. The aspect of enterprise integration is only the first step that this management approach provides for the inclusion of the disabled person at school, work and social level. The model aims to reconcile the interests of the enterprise with the need of the disabled individual to work not only for an economic need, but also for satisfying an irrepressible need for identity and integration through and in his work, and for ensuring his productive contribution towards society (Angeloni, 2011; Shrey, 1996; Geisen, 2015). The difficulties in achieving this aim are clearly linked to the vision and preconceptions on the ill and disabled subjects, according to which they often have less working skills and mechanisms that are self-induced by disability and the disease itself, and are linked to changes in the ways of carrying out daily activities due to the pathology (Roncallo & Sbolci, 2011). According to an operational definition, disability management is an active process of minimizing the impact of disability (whether it is due to a disability, an illness or an accident) on the individual's ability to participate competitively in the socio-economic environment; at the same time, this process contributes to controlling social costs, as well as supporting employment and economic productivity (Shrey, 1996, 2011). In order for this to become concrete, it is therefore essential that society, enterprises, workers and institutions change their way of conceiving and facing the problem of disability, which is not a

disease to be cured, but a characteristic inherent in human diversity, which must be enhanced and protected. So the institutions should act on the topic both in a general sense, by teaching to respect the rights of citizens belonging to weak categories, and in a specific sense, by normalizing in Italy those principles of design for all, accessibility and auxiliary technologies, already implemented for decades in the USA and in the countries of Northern Europe (Griffo, 2012; Lazzara, 2015; Torre, 2007). Disabled people represent a vast pool of unused and largely ignored workforce; hiring such individuals can be a more than sensible choice for enterprises and for the entire economic system in order to increase productivity, but this requires overcoming the fear of what is not known and a greater attention to skills rather than to disability. Disability management is the key to activating this change, representing the model to be used for a multitude of both public and private enterprises and organizations, in order to facilitate and incentivize the inclusion of disabled people in society and in the labor market, making them productive unities for the whole economic system. In this way a network could be created, characterized by the possibility of relating the various enterprise realities to the disabled subject to obtain a reciprocal economic-social benefit. In fact, by taking part in this network, enterprises could use a diversified workforce, improve their productivity, reduce staff turnover, make workplaces safer, improve customers' service and increase brand loyalty; at the same time the full employment and equal opportunities of disabled people would be encouraged, setting up an initiative whose primary aim is to counteract negative stereotypes about disability, and replace them with an inclusive vision of the value of diversity and the contribution that every individual can give to society (Angeloni, 2010; 2011). In summary, this management methodology also generates advantages for different categories of stakeholders, in particular (White et al, 2016): • Governments, since, if disabled people are able to achieve their autonomy, the welfare-type costs to be borne for them are greatly reduced; • Enterprises, because they can achieve productivity gains, thanks also to a better enterprise vision, obtained through a more responsible corporate climate that cares about workers' needs; • Trade unions, since workers are more protected; • Workers, who are valued and have the opportunity to fully express their skills. The lack of adequate knowledge and tools to deal with this phenomenon, especially in enterprises, is leading to poor management and organization of the disabled's needs, and risks wasting their know-how and productivity. In this scenario it emerges the need to create, or even better to identify, the professional figures able to direct this management approach and convey it to the multiplicity of benefits it can generate in relation to disability, understood as critical under different points of view ranging from the economic to the scholastic one, up to the social and cultural aspect.

3. The professional educator as a disability manager

A first characteristic that the aforementioned professional figure (defined as a disability manager) must have is the multidisciplinary educational and cultural background. This is the starting point for considering the professional educator as the suitable subject to deal with the inclusion of the disabled person from the different points of view, provided for by the disability management approach. Indeed, he should implement specific educational and rehabilitative actions, within a project characterized by a multidisciplinary approach, aimed at a balanced development of disabled individuals with educational/relational objectives in a context of participation and recovery to everyday life; he would thus take care of the positive psychosocial inclusion or reintegration of these subjects living difficult situations (Di Palma & Tafuri, 2016; Marasco, 1999) In this regard, a disability manager must have individual skills and tools for achieving a unified and coordinated vision to improve the quality of territorial and economic policies (18), and the professional educator, thanks to his training path, is certainly prepared to collaborate with other professional figures, stimulate groups and individuals to pursue the goal of social reintegration by defining educational, welfare and health interventions that respond to their respective needs through the development of autonomy, individual potentials and social

relationships with the external environment (Marasco, 1999; Salomone, 2005; Santerini, 1998). Then, he should favor urban accessibility, social-health coordination, school and, above all, work inclusion, by overcoming the boundaries of services and enhancing the existing professional skills in the area. The disability manager is, therefore, a figure that has the task, on the one hand, to seek diversified solutions that emphasize the strengths of people with disabilities and, on the other, to spread an organizational culture free from prejudices and discriminatory feelings. So, as previously stated, the first obstacles to be faced are the prejudices and ways of thinking of many enterprise managers and policy makers who, due to a “managerial myopia”, expect only a reduction in productivity from management methods based on disability management, thus without grasping the many advantages that may arise in the long term (Angeloni, 2010; 2011; Roncallo & Sbolci, 2011). In this regard, the skills of the professional educator appear suitable to satisfy the managerial and cultural needs we have just described; in fact, he would be also able to achieve the task of building integrated networks, implement services and propose management solutions that, starting necessarily from the needs of the person with disabilities, are able to pursue social, enterprise, educational and productivity goals. The professional figure of the disability manager has already developed in countries such as Canada and the USA, particularly attentive to the management of these critical issues through the Disability Management modus operandi; in Italy, it was taken into consideration for the first time in the «White Paper on accessibility and urban mobility “, the result of the work carried out by the technical panel established by the municipality of Parma and the Ministry of Labor, Health and Social Policies in 2009; it was initially hypothesized as a figure to be included mainly in the public administration, and in particular, in the municipalities with more than 50.000 inhabitants. However, the employment of the disability manager in Italy could be necessary to implement the commitments that the country has taken by ratifying the UN convention on the rights of persons with disabilities, with Law No. 18 of March 3, 2009 (Baratella & Littamè, 2009). At this point, in identifying which subjects are able to effectively and efficiently interpret this role, the hypothesis of the professional educator is certainly very valid, since he is able to face both the organizational and managerial problems, and those arising from a cultural approach and a social dimension that is still not able to attach value to the active and productive disabled resources.

Conclusions

The current world situation is characterized by a substantial growing gap between the demand for social services (including those of health, welfare, economic and labor support nature etc.) and the constraint of the slack of resources available to deal with it (Belfiore et al, 2015). Among the main problems to be dealt with through an appropriate rationing of resources and efficient management, there is certainly disability (Di Palma & Tafuri, 2016). In fact, more than a billion people in the world has some forms of disability, i.e. about 15% of the world’s population; about 80% of these live in developing countries. Furthermore, we need to consider the progressive aging of the population to which the increase in people affected by chronic degenerative diseases is closely correlated, which will directly multiply the number of people with disabilities. In this regard, the importance of managing this problem of global entity in a timely and effective way was discussed, and after identifying the most suitable management model in the disability management, we tried to identify the possibility that it was the professional educator himself to cover the fundamental role of disability manager. This figure, for his skills in approaching the neighbor, especially those who are in trouble conditions like disabled people, appears highly qualified to deal with a process of inclusion aimed at ensuring greater autonomy and self-esteem. This, together with the organizational and managerial attitudes, especially related to social-health contexts, makes him able to fully implement the guidelines of the management model of disability management, more than any other professional figure, thus considerably increasing the chances of generating a positive cultural change and a collective socio-economic benefit.

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