

## New Possibilities for Employment: The Gifted Job Seeker

By Bruce Anderson and Gina Anderson

The current movement towards integrating “recovery” principles into mental health practices is being promoted by a wide range of government, advocacy, and service provider groups. Everywhere you turn these days there are recovery conferences, recovery and spirituality dialogues, recovery centers, pilot recovery programs, and peer recovery groups. The wisdom of the years tells us that, while we are in the beginning stages of a new and powerful movement, we should not simply abandon what we are currently doing in favor of this new thing. The time is ripe to cautiously explore the links between recovery and other principled healing processes which are currently being effectively utilized by individuals with psychiatric disabilities, families, practitioners, and communities.

In an odd twist for a “new” movement, the interest in recovery is actually giving us the chance to look backward as well as forward. In this looking backward, there is the opportunity to reclaim two immediately helpful old ideas which, if seriously utilized and not simply glossed over as “nice but impractical ideas”, have the potential to completely alter the current state of employment opportunity for individuals with disabilities. First, recovery has brought with it an emerging permission to openly discuss the relationship between spirituality, healing, and mental health, which previously has not had a legitimate place in most public mental health forums. Secondly, the language of the recovery movement has brought with it words that, when taken back to their root meanings, provide a specific new foundation for redefining employment support practices, creating the potential for a dramatic increase in the numbers of individuals with disabilities being welcomed into workplaces.

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*Recovery makes frequent use of the word “healing”.* If we expand the context to include healing both the wounds of the person and also the wounds of the community, significant possibilities arise.

How is a community wounded by disability? One of the wounds a typical community carries originates in the transferring of responsibility for certain groups with similarly defined “deficits” (i.e.: disability, poverty, immigrant status, homelessness...) to care systems employing professionals. This transfer, over time, produces two tragic consequences. First, the community at large begins to define sizeable groups of community citizens by their deficits rather than their capacity to contribute. The wound and loss to the community is significant, because it is unlikely to make use of the tremendous storehouse of gifts and

skills of those deficit-defined citizens. Second, because social service employees are seen as “taking care” of this group, the general community begins to see itself as incapable of being in helpful, powerful, and reciprocal relationships with large segments of their own community. The resulting wound is a feeling of permanently broken relationships, fear, and helplessness, which increases the barriers between “us” and “them” and allows the seeds of hopelessness to take root.

How is the deficit-defined community member wounded? After listening to and living with the stories of individuals with psychiatric disabilities for many years, I can attest to the fact that one of the frequent and predominant wounds resulting from mental illness is the breaking of relationships and the isolation that results.

On both sides, the primary wounds result from broken relationships, feelings of helplessness, and the inability of the community to fully utilize the gifts and skills of all its members. When we expand the idea of healing to include both the person and the community, we can begin to imagine that workplaces need employees with disabilities as much as people with disabilities need workplaces. Since now it is all of us who are involved and

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need healing, there can be a renewed sense of urgency and commitment to the idea that all community members have a place and a contribution to make. This can serve to turn our focus away from trying to “fix” the deficit-defined group, and toward the healing of the whole community. There is now a specific purpose for community building.

*Recovery has brought the word “spirituality” into the context of disability and employment.* In a modern context, *employment* or *work* generally has come to mean the offering of goods or services in exchange for money. This model of employment is a relatively new idea in the world.

In older cultures, which were most often organized around the inter-relationship between spirit, the natural world, and people, the fundamental idea underlying employment was very different. Each person in the village had a specific and unique gift to bring, this gift was tied to spirit, and the giving of this “gift” was a primary way for the person to relate to others, fulfill his/her life’s purpose, and find solid ground in times of trouble. Most importantly, each person, regardless of any surface abilities or inabilities, was believed to have a gift. Youth initiation processes were often designed with the intention of helping the young person discover his/her gift, which then became one of the primary ways of contributing to community life.

With the advent of industrialized nations, cash economies, and mass production, citizens began to be identified primarily as “producers of goods” rather than “givers of gifts”. As the language of gifts was replaced by the language of production, civilizations began to reduce the number of citizens identified as truly gifted, generally reserving the designation of gifted to community members seen as having extraordinary ability. One of the results of this global shift from “gifted” to “producers of goods” has been to allow a

kind of generalized permission to see individuals who get help from social service systems as “non-producers”, therefore having little value to the community. The logical result is a self-perpetuating cycle of unemployment, further isolation, and stigmatism.

The recovery movement, if it is to be helpful at all in understanding how to increase employment opportunity, will lend support by focusing on and encouraging at least three primary beliefs:

**1. Every person has a core gift, and there is a way to support the person in giving it.** If taken seriously, this one belief will single-handedly re-shape the idea of who is “ready” to work, and whether or not every person has something to offer.

**2. It is a fundamental responsibility of individuals, families, peers, service systems and other allies to help individuals with psychiatric disabilities accurately define and be given opportunities to give these gifts.** Healing the wounds of separation requires that the person is seen for their gifts and welcomed to give them. The adoption of this belief will involve significantly altering how we “assess” a person’s capacity, define the differences between gifts and other skills, and help a person define a vocation to pursue.

**3. The functions of employment, spirituality, gifts, and community are interwoven and must be understood and discussed in the context of each other.** This will involve showing courage in finding ways to discuss spirituality in the context of employment, acknowledging and providing opportunities for the healing necessary in both individuals and communities, and expanding the web of community places that operate from an understanding of the old idea of gifts and community capacity.

I recently had the opportunity to attend two distinctively different events within a short period of time. The first was a retreat attended by a group of individuals, all of whom experience a psychiatric disability. Over the course of a full day, the retreat participants worked with each other, using a structured process, to identify and specifically name each person’s unique gift. As I watched the day unfold, I became deeply moved while witnessing some individuals, for the first time, claiming their gift and feeling acknowledged. I also heard stories during the day of the deep wounds that have resulted from knowing there is

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a gift inside, and feeling unseen and unacknowledged for it. One person said it was like there has been a cover of disability shrouding the gifts that are buried inside. Not surprisingly, many of the individuals stated core gifts of being able to help others, offer problem-solving support, and stand by other individuals as they make changes in their life.

The second event I attended was a statewide governmental summit meeting that was designed to address the “critical shortage of mental health workers”. Throughout the course of the two-day summit, it was difficult for me to forget the faces and the specific gifts of the individuals with psychiatric disabilities attending the retreat just a week earlier. As the speakers at the podium diligently listed the shortage of available workers for professional

positions, I was thinking of specific individuals I had just met at the retreat who could be doing those jobs.

Attending these two events helped me remember that, although we have come a long way, we are still in the very beginning stages of diminishing the lines between them and us. When we finally believe that all of us are gifted, the unique distinctions between us will

become more important than the naming of the deficits we now use to separate and divide us.

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Hopefully, this recovery discussion will bring us back to the origins of the word medicine. Looking in the dictionary next to my desk, I see that “medicine” is defined as “the process or substance by which the wound is healed”. Employment, by its nature, is done in connection with others and provides opportunities for giving gifts, mending broken relationships and creating new ones. Taken literally, employment is both “medicine” and “healing”. It may be helpful, as we try to move forward

by finding strategies within the framework of recovery, for us to first look behind us and reclaim the original meanings of words that have guided us wisely for centuries.

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