

## **CAVEWAS** Corner

Dear fellow colleagues and readers, here is our most recent contribution to CAVEWAS Corner.

As many of you know, CAVEWAS (Canadian Assessment, Vocational Evaluation and Work Adjustment Society) is a member society of VRA Canada, serving in large part to represent and support the professional and developmental needs of vocational evaluators as well as professional rehab personnel specializing in work adjustment of injured workers and the like. In this section, you will find current and candid articles authored by CAVEWAS members, non-members (and future members alike) that will share, discuss, and communicate with you developments and changes affecting our membership. Amongst them issues of best practice, professional development and designation, as well as industry trends.

We hope you continue to find the content in this section stimulating, motivating, and informative and we encourage your ongoing participation and contributions.

## Enjoy!

## CAVEWAS NATIONAL BOARD of DIRECTORS

If you are a CAVEWAS member and have any ideas, opinions or thoughts relevant to this section and you would like to share, discuss, and communicate them in the next issue, please contact: Jeff Cohen at jcohen@vocationalalternatives.com We also encourage you to join our group on LinkedIn.

R especting diversity is one of the first tenants of the Commission on Rehabilitation Counsellor Certification Code of Ethics under the title of Counselling Relationship, Section A. The language in this tenant covers many lifestyles and cultural backgrounds under two subheadings; Respecting Culture, and Nondiscrimination (Commission, 2010). This document reminds certified rehabilitation counsellors of the duty to "demonstrate respect for the cultural background of clients in developing and implementing rehabilitation and treatment plans, and providing and adapting interventions." Additionally, nondiscrimination means "rehabilitation counsellors do not condone or engage in discrimination based on age, colour, race, national origin, culture, disability, ethnicity, gender, gender identity, religion/ spirituality, sexual orientation, marital status/partnership, language preference, socioeconomic status, or any basis proscribed by law." These can be demonstrated in various ways, but a couple brief stories from an internship experience can illustrate the point.

## Respect - Beyond the Patient

While a student was at her internship site at a rehabilitation hospital, she was directed to administer a mini-mental status exam (MMSE) on a patient who was recently admitted. This is a test repeated daily to determine a patient's progress during what was usually slow recovery from stroke or acquired brain injury. The new patient was accompanied by his wife; they were a young couple that appeared Asian.

The staff was delighted that his wife was present as the patient experienced retrograde memory loss forgetting his second language, English. We learned from his wife that they were foreign students from China but no one at the facility was able to communicate with him, except the wife, who did the interpretation for the staff. The patient was in a horrific accident between an 18-wheeler and an economy-sized car and he sustained a severe brain injury.

"[Awareness and knowledge of a patient's culture] allows for the staff to support the patient's next of kin with respect"

The patient was stabilized and recovering from multiple surgeries when he arrived at the rehabilitation hospital. He was able to respond to the MMSE and was also asked if he was suicidal, with a "no" response. The patient's wife never left his side and the staff was very impressed with her unwavering commitment and that of her friends who brought homemade food and fresh clothes to the hospital room. After the hospital finally secured a translator through the patient's first hospitalization, the staff (including the intern) repeated assessments for that day. The patient's wife was asked to leave the room during the medical and psychological assessments. She was

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