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Has Person-Centered Planning Become the Alchemy of Developmental Disabilities? A Response to O'Brien, O'Brien, and Mount

Steve Holburn and Peter Vietze

In the recent article "Person-Centered Planning Has Arrived . . . or Has It?" (O'Brien, O'Brien, & Mount, 1997), there is a tone of frustration, almost resignation, in lamenting today's often mindless attempts at person-centered planning. Indeed, the founders of this approach have been warning us for years about possible misapplications (Mount, 1994; O'Brien & Lovett, 1992). It was only a matter of time before it happened: Yanked from its counter-cultural foundations and exploited by the mainstream service system, person-centered planning has become the alchemy of the developmental disabilities field. Of course, the "real" person-centered planning has not changed, but O'Brien et al. (1997) indicated that now it is mindlessly being (a) adopted by agencies that do not embrace significant change, (b) required as a standard process, (c) attended by people who do not know the person very well, (d) done in the absence of crucial players, and (e) evaluated quantitatively for its effectiveness.

O'Brien et al. (1997) reviewed the conditions under which person-centered planning began and, generally, how it should be employed; but juxtaposed against today's large-scale mis-implementation, the authors do not inspire—they scold, and readers are left wondering about how this all happened and whether this approach is just a fad that will end up like the hula-hoop. We do not think person-centered planning will meet that fate. To the contrary, it is the most powerful and dynamic approach that we have experienced in the field of developmental disabilities. Conversely, we have also been party to person-centered planning ventures gone awry because of competing system constraints, such as those described in the article. As professionals who are involved in facilitating and evaluating person-centered

planning, we offer some "counterpoints" to the views of O'Brien et al. (1997). Our comments are about bureaucracy, tinkering, and measurement as they relate to person-centered planning. If there seems to be no central message in this response, it is because we have presented separate reactions to different points advanced by the authors.

The first reaction pertains to the antithetical nature of person-centered planning itself. Although it can be refreshingly inspirational to an employee of a sizable organization, person-centered planning it is not "system-friendly." It "deprofessionalizes" the method of assisting people with developmental disabilities and turns the traditional decision-making process on its head. As described by O'Brien and Lovett (1992), if the philosophy of person-centered planning takes root in an agency, it erodes organizational uniformity and destabilizes the system. Although some organizations might welcome change in this manner, others might feel that adopting such a process is illogical, and they may resist the change as a matter of survival.

The criticisms of O'Brien et al. (1997) appear to be aimed most directly toward over-regulated systems that are "dominated by a bureaucratic-professional perspective" (p. 481), where person-centered planning can become very distorted. At this end of the organizational spectrum, such mis-implementation should not be surprising if, as Wolfensberger contended, "Nothing works in a system where nothing works" (personal communication, December 23, 1997). This is the sector of our service system where community values do not seem to operate (Himadi, 1995) and where counter-habilitative practices endure (Meinhold & Mulick, 1990). Alternatively, person-centered planning appears to thrive at the other end of the orga-

nizational spectrum, where it happens "at the outer edges of service systems" and "outside the formal structure" (O'Brien et al., 1997, p. 481). This is the first home of person-centered planning, but now it seems to be losing its viability as "it moves toward the center" (p. 483) of the system.

Unfortunately, it is easy to get confused as to where person-centered planning belongs. On one hand, its founders imply that all systems designed to assist people with mental retardation, however well-intentioned, become mechanisms of oppression from which people can be freed with mindful person-centered initiatives. If this is true, person-centered planning should remain on the fringe of the organization. On the other hand, its developers promote organizational change as a central feature of the process, which suggests that person-centered planning should move to the center of the organization. Perhaps organizational flexibility is the key to where person-centered planning should occur, but it appears to us that most agencies cannot adopt true person-centered planning as described by its founders.

One deterrent to agency adoption concerns the ingredients that comprise person-centered planning. It is a multifaceted approach, and it is not easy to do. It is artful, unique, personal, complex, and extended. Many of its features and components are out of range for many person-centered endeavors, such as the availability of certain participants, flexible resources, and organizational commitment; and, sometimes, no amount of mindfulness can bring them into the picture. However, practitioners in service systems have become interested in the principles and practices of person-centered planning, and despite the absence of the full ingredients that define the process, many proceed to make the most of what is available in their person-centered planning efforts. Admittedly, if too much of the process is compromised, the group is doing something other than person-centered planning, and it is a misrepresentation to call the process "person-centered planning." More important, new planning efforts should incorporate new thinking, new experiences, and different kinds of resources. In other words, system-based decision-makers cannot learn new ways of assisting people if they do not defer to others who are outside of that system and if their experiences with consumers remain inside the system.

However, on a more positive note, aren't

these the kind of circumstances under which new practices are discovered? Perhaps we will find a fruitful arrangement that can be more easily adopted by agencies and other parties. If person-centered planning is to evolve into a better way of helping people, it would ideally be more inclusive and more person-directed. Methodologically, the process might be less complex, and in some ways more efficient. Perhaps person-centered planning has already evolved to its final form, such that tinkering with the process jeopardizes the endeavor and leads to unfulfilling achievement. If so, it is logical to assume that new approaches will emerge if they can achieve the same or similar outcomes by using available circumstances and resources. In our continuing search for community membership and ways to facilitate self-determination, it is conceivable that we will discover this hypothetical process, but it will not be person-centered planning. The approach might be less of a prescribed process and more of a direct way to re-orient power to the person. Maybe there is a simpler way of enabling people to control their own money, make their own decisions, and direct their own futures. In this search, many of us might rediscover the value of direct skill instruction in enhancing competency.

An encouraging comment recently was offered by Haveman and Head (1997), who noted that despite the pressures to conform to complicated systems, people throughout the country "are examining their bureaucracies and rules, their attitudes and regulations" (p. 29). Such examination is due, at least in part, to the founders of person-centered planning, and it might be the catalyst for finding new ways to accommodate person-centered planning or alternative methods of assisting people.

Our final reaction pertains to a question often asked by human service workers, "Does person-centered planning really work"? This is a fair question. Human-service employees are wise to be cautious about committing themselves to something that has little "hard data" to support it. However, two caveats accompany this question. One is that the answer requires implementation of *real* person-centered planning, not something *like* person-centered planning. The other problem is that assessing the effects of person-centered planning as an intervention challenges common methods of program evaluation. O'Brien et al. (1997) alluded to two aspects of this difficulty in lamenting that

"Now some people want to evaluate the effectiveness of person-centered planning by counting its outcomes, sometimes in predefined categories" (p. 483). We believe that person-centered planners *should* use predefined categories, such as the "five essential outcomes or accomplishments" described by O'Brien (1987, p. 177) in their evaluation efforts. We acknowledge that measures of frequency, rate, and duration cannot fully capture the significance of molar life changes (landing a new job or finding a new home in the community are not easily represented in a table or on a graph), but the position that person-centered planning outcomes should not be evaluated quantitatively is unsupportable. Conversely, we acknowledge that stories of person-centered planning successes, by themselves, are subject to drift as a result of positive expectations, selective memory, and other biases. Another evaluation difficulty referred to in the preceding quote pertains to the sometimes unforeseeable outcomes of person-centered planning. Anything can happen. If the program evaluator is constrained to reporting only the changes in a priori, predefined categories, the results will be incomplete. (See Baer, 1997, for a discussion of the complexities of evaluating programs objectively.) It is clear that comprehensive evaluation must consider multiple perspectives, including those reflected by quantitative and qualitative approaches, as well as formative and summative techniques.

Perhaps the most challenging aspect of evaluating person-centered planning concerns the difficulty in separating conceptually the *process* of person-centered planning from its *outcomes*. For example, increased autonomy and community involvement are components of the process, yet they come about after person-centered planning begins. With this kind of overlap in independent and dependent variables, a better question might be, "What is the extent to which person-centered planning is being done"? However, this question implies that if person-centered planning is occurring, good things are happening, and one is confronted by a kind of teleological stalemate.

Fortunately, it is easy to accept the premises and goals of person-centered planning as good things for people, and we are grateful to make use of the only method we know that allows practitioners and others to deliberately set out to accomplish those things. It should be remem-

bered that person-centered planning was developed as a countermeasure to conventional approaches and interventions that were not working very well for large numbers of people. Its developers seemed to re-ignite the normalization revolution begun in America by Wolfensberger in the 1970s in their summarizations of the fundamental needs of oppressed people with disabilities and in their demonstrations of how a diverse group of committed individuals can help a person clarify and accomplish essential life-changing goals. It is clear that conventional professional interventions are not very helpful to a person who does not have choices, friends, or anything interesting to do, but it is a mistake to assume that traditional interventions do not work for people with developmental disabilities or that they should be supplanted with person-centered planning. When basic living conditions like those that you and I enjoy are experienced, traditional interventions *can* be beneficial. The question that many of us should be asking is not whether person-centered planning works, but, rather, "Why do we bother to measure the effects of our clinical interventions, applied behavior analysis, and teaching strategies that are instituted under conditions that often doom these procedures to failure"?

In closing, we note that person-centered planning appears to have become the alchemy for systems that are unable to accommodate the process and yet need to stake their claim in the revolution to support people with developmental disabilities. When applied in bureaucratic organizations, person-centered planning has met the same fate as have professional interventions in such environments. Under more fertile circumstances, person-centered planning appears to have transformed the thinking of many professionals and certainly the lives of many people with disabilities. Multiple and innovative methods of program evaluation will be necessary to determine the full effects of person-centered planning and the extent to which it can be faithfully implemented. It is possible that other successful forms of assisting people will be created by finding ways to help them determine for themselves a better quality of life when person-centered planning in its "pure form" is not possible. For traditional organizations such efforts will be fruitless unless planners accede to influences from outside their own

system in figuring out ways to help people determine what they want and how to get it.

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