The preface states that "Therapeutic recreation: A practical approach" is an introductory text providing a comprehensive overview of the fundamentals of therapeutic recreation as a profession. That the text is a comprehensive overview is both its strength and its weakness. The authors take the reader through the growth and maturation of the profession, skills and characteristics of successful practitioners, and a thorough description of many characteristics of the clientele with whom they may work. However, in compiling such a complete overview of the profession some issues are superficially noted. An example of the possible confusion which arises from superficially addressing some issues is the statement that recertification by National Council for Therapeutic Recreation Certification requires the accumulation of a minimum of thirty hours of continuing education units (3 CEUs) every five years. As accumulation of CEUs is but one option for attaining recertification, the novice reader may misunderstand the complete recertification process.

Part One provides a theoretical basis for therapeutic recreation focusing on the association between the profession's development and the development of the professional. The six chapters of part one answer common questions such as what is therapeutic recreation, how did the profession evolve, who are therapeutic recreation specialists, and how are therapeutic recreation services designed and managed. Additionally, readers are turned inward to explore their personal values, choices, and characteristics, while being encouraged to evaluate their motivation for choosing therapeutic recreation as a profession.

An overview of changing societal influences, such as values of recreation, lives of persons with disabilities, and healthcare trends, leads to a current definition of therapeutic recreation. Through this definition, therapeutic recreation is positioned among the multitude of health related professions.

A foundation for therapeutic recreation service delivery is illustrated in the presentation of two new models. Quality of life is central to the Therapeutic Recreation Outcome Model, emphasizing development of the whole person. The Therapeutic Recreation Service Delivery Model extends previous models developed by Peterson and Gunn (1984) and Austin (1991), by adding assessment to the process. This addition is pertinent given the requirement of assessment as a prerequisite of all other therapeutic recreation services.

Although the new models are thought provoking and necessary in a developing profession, mention of preexisting models is exigent. The Therapeutic Recreation Service Model (Peterson & Gunn, 1984) receives one line in a subsequent chapter and the Health Protection/Health Promotion Model (Austin, 1991) is omitted. These two models have and continue to contribute to the growth of the profession and seem appropriate elements in developing the foundation of a newcomer to the field.

The presentation of the historical evolution of therapeutic recreation is real and readable. A rapport is developed with the reader and typically the text flows without interruption. The analogy of therapeutic recreation's development to human development is but one example of the practical nature of this text. Each developmental period includes historical aspects specific to the characteristics of a profession: service, professional organizations, standards, body of knowledge, and training and education. This chronology aids the reader in sequencing events and assimilating information.

Chapter 4 simplistically outlines the therapeutic recreation process, introduces cognitive, social, psychological, and physical developmental hierarchies, and provides examples applicable to different settings. Individual and comprehensive planning are compared noting differences and similarities, particularly differences in clinical versus community settings.
While differentiating these settings is valuable in showing the breadth of therapeutic recreation services, these comparisons are presented as somewhat black and white, not giving either setting its just depth. What defines clinical or community settings? While the terms are used throughout the text, no definitive distinction is provided. Is a community mental health facility a clinical or community setting? An example, “in clinical settings persons who have suffered traumatic injuries require diagnosis and treatment/rehabilitation, while in community settings persons with behavioral and leisure functioning deficits require education and promotion of behaviors critical to inclusionary experiences” (pg. 144), presents the settings as definitively different. Diagnosis, treatment, education, and inclusion might all be goals of a community mental health agency. A similar concern continues through discussion of management practices in clinical or community settings. These chapters are not mutually exclusive, as parts of each may be easily applied to the other setting.

Part Two is an exquisite overview of disabling conditions. The student of therapeutic recreation or an experienced professional can benefit from the diagnoses covered. Each chapter includes an overview, functioning characteristics, purpose of therapeutic recreation, delivery settings, leadership/intervention considerations, and a case study application of the therapeutic recreation process. This format should enhance the comprehensive understanding of disabling conditions and associated implications for therapeutic recreation.

Each chapter ends with study questions, practical exercises, and key terms all of which will be valuable to the reader. A certain plus of this text is the practical experience concluding each chapter, and the practical examples provided within the text. Additionally, those spurred to further inquiry will find references and selected readings following each chapter.

Overall the text is reader friendly. Bold terms throughout the text indicate terms included in the chapters “key terms” allowing readers to find greater definition without interrupting the flow of the text. The use of tables maintains readability while providing valuable information.

The second edition is quite different from the first, while maintaining a practical approach to introducing the profession. Rearrangement of chapters in Part One enhances the content flow and lays the foundation of therapeutic recreation. Diagnostic groupings are expanded and reclassified. The text, while providing a comprehensive overview of the profession, borders on information overload. Possibly, the text best serves the student as an ongoing reference book throughout their studies, and as an excellent desk resource for all therapeutic recreation professionals.

References


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