From International Assistive Technology Professional Organisations

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To cite this article: Natasha A. Layton, Roger O. Smith, Peter Cudd, Sangmin Lee & Etsumi Okigawa (2018) From International Assistive Technology Professional Organisations, Disability and Rehabilitation: Assistive Technology, 13:3, 323-324, DOI: 10.1080/17483107.2017.1379102

To link to this article: https://doi.org/10.1080/17483107.2017.1379102

Published online: 02 Nov 2017.
Members of the international Alliance of AT Professional Organisations offer congratulations to Disability and Rehabilitation: Assistive Technology, on the achievement of 11 volumes. In this letter, we add our voice to the call for an AT user focus and consensus on the way AT and its outcomes are described and measured. We propose that belonging to the AT professional community can enable us to achieve this.

The challenges Dr Scherer identifies impact upon us as AT user and AT practitioners across the world. The Alliance of AT Professional Organisations works together across international boundaries (North America, Europe, Japan, Taiwan, Korea and Australia) to promote good practice in all aspects of AT service delivery. Each organisation works to educate, support and connect AT stakeholders through communities of practice, regular national and international conferences, publications and a range of other strategies. These organisations are comprised of rich, highly inter-personal memberships that include AT users, AT practitioners, AT service providers, AT researchers and educators, AT suppliers, and AT innovators and producers.

Beyond professional silo’s: towards co-production with interdisciplinary colleagues and AT users

Dr Scherer points out the different orientation of various AT professionals, a fact acknowledged in the literature and the reason many of us elect to take a team approach [1]. As she reminds us, AT user experience and perception of benefit are of prime importance. Person-centred and indeed person-directed practices are required to align our practice to deliver individualised outcomes. Many workplaces are attempting to enact person-centred practices. It may however still be difficult in the workplace or research facility to collaborate with AT users on an equal footing. Networking between stakeholder groups locally, regionally, nationally and indeed internationally can all contribute to solutions for individuals. Belonging to your local AT Professional Organisation is a practical step to move away from “professional silo’s”. AT Professional Organisations provide an avenue for all AT stakeholders to have a voice, enabling co-design and co-production. For example, co-designed research between AT practitioners, researchers and users in ARATA (Australia) identified and tested what AT users want from their AT service delivery. This collaborative work led to coauthored presentations and publications, as well as providing evidence to support calls for policy review [2].

Universal terminology and access for all

The breadth of AT (from mainstream to specialized), the fact that complexity frequently arises due to the interaction between device, person and environment, and the rapidity of technological innovation can be overwhelming for individual practitioners and users alike. Members of AT Professional Organisations use education and representation to develop common understandings. Education mechanisms range from formal publications to regular national and international conferences, for example freely downloadable educational material on AT terminology [3], or summary “state of the science” statements [4].

Members of AT Professional Organisations provide representation on key bodies such as National and International Organisations for Standardisation. Members of RESJA (Japan) lead an international committee (including members of AAATE, ARATA and RESKO) working on the current Terminology and Classification Standard for Assistive Products [5]. These international connections enable AT practitioners and AT users “on the ground” to inform and be informed by international developments.

Currently exciting opportunities exist to harmonise with WHO ICF [6], and to inform the products and technology (environment) component of WHO ICHI [7]. The chance to share our knowledge and resources with the “majority world” who do not have access to needed AT is also upon us with the Global Cooperation on Assistive Technology (GATE) [7]: a WHO initiative to realize the obligations of the Convention on the Rights of Persons with Disabilities [8] by increasing access to assistive technology.

Bridging the knowledge, policy, practice divide

We agree with Dr Scherer that the field of AT is experiencing significant growth, in a context of changing demographics and technological innovation/disruption. AT as an intervention (in rehabilitation) and as a facilitator (in daily life) is well placed to address health and well-being challenges globally. Delivering on this potential is a key challenge for us individually and collectively. Our journals contain evidence of extensive research work to further this end, yet there is an acknowledged divide between knowledge, policy and practice [9]. AT Professional Organisations help not only to foster this evidence base but to distil it into position papers and issues statements, government submissions and information/education tools. An excellent example of this “research into practice” work is the AAATE Position Paper on Service Delivery [10].

Quality assurance creates linkage between knowledge, policy and practice. AT Professional Organisations support quality assurance activities with their educational activities and formal guidelines. Oversight boards at RESNA, for example, certify individuals through its ATP credential with the Professional Specialty Board, product quality standards through the Assistive Technology Standards Board, and most recently, educational standards with the Committee on Accreditation of Rehabilitation and Assistive Technology Education (CoA-RATE) [2].

Ultimately, though, it is the individual AT stakeholders who provide extensive practice knowledge to AT Professional Organisations. These individuals translate this knowledge to champion systems which enable great AT outcomes. We hope the
readers of Disability and Rehabilitation: Assistive Technology continue to contribute and strengthen the AT field: joining us through active participation in your local AT Professional Organisation is one way to do this.

Notes

Disclosure statement
No potential conflict of interest was reported by the authors.

References

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Received 10 September 2017; accepted 10 September 2017
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