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The Occupational Therapist's Handbook for Inclusive School Practices

by

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Excerpted from The Occupational Therapist's Handbook for Inclusive School Practices
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Brookes Publishing | www.brookespublishing.com | 1-800-638-3775
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About the Authors

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"I think the field of rehabilitation is to people with disabilities what the diet industry is to women. We live in a society that idolizes a full and completely artificial conception of bodily perfection. This view of the 'normal' body tyrannizes most, if not all, women so that far too many women in our culture grow up believing that their bodies are inadequate in some way. The issue here is that I want professionals to think about the whole parallel between dieting and rehabilitation. That's why I always tell people with disabilities, 'Never do physical therapy with a therapist who is on a diet!' If she hates her own body, she'll inevitably do harm to yours!"

—Norman Kunc (*Giangreco, 2004, p. 36*)

"I have been an occupational therapist for 10 years. I always thought Josh was smart, but I never knew how intelligent he was until things changed. Our principal said we needed to do therapy services in his fourth-grade classroom. He went from doing puzzles during our occupational therapy sessions to writing persuasive essays using the [AlphaSmart]. Sure, he still needed to take a break every 10 minutes, but he was showing us that he was a thinking person . . . a person who was doing grade-level work!"

—Enzo (OT)

"When I approach a child, [s]he inspires in me two sentiments: tenderness for what [s]he is, and respect for what [s]he may become."

—Louis Pasteur (*Institut Pasteur, n.d.*)

This chapter introduces the concept of *rethinking students*. Rethinking a student entails getting to know the student and then reflecting on how you see, treat, provide services to, and work with him or her. First, we discuss how to describe students to others through student strengths and multiple intelligences. Then, we describe the concept of presumption of competence and using age-appropriate and person-first language.

STUDENT DESCRIPTIONS

Shawntell Strully is a 22-year-old who lives in her own home with roommates, attends classes at Colorado State University, volunteers on campus, travels during spring break, gets around in her own car, has her own interests, likes and desires, has a boyfriend, and speaks out on issues of concern to her.

Shawntell Strully is 22 years old, is severely/profoundly mentally retarded, is hearing impaired, visually impaired, has cerebral palsy, has a seizure disorder, does not chew her food (and sometimes chokes), is not toilet trained, has no verbal communication, has no reliable communication system, and has a developmental age of 17–24 months.

(Strully & Strully, 1996, pp. 144–145)

These two radically different descriptions of Shawntell come from two different groups of people. The first description comes from her parents. The second comes from her teachers and other school support personnel. Although not all educational professionals would describe Shawntell in these ways, this is how her team described her. It is



surprising to compare these statements side by side. The stark contrast raises the question of how the same person can be described in such disparate ways.

The principal reason for these radically different descriptions is that each group of people looks for different things and approaches Shawntell from a different perspective. Shawntell's parents know her deeply. They have spent a great deal of time with her, know her intimately, and understand her as a person who has wide interests and capabilities. Their description of her cites her interests, gifts, and talents. Conversely, the description generated by Shawntell's teachers reflects a more distant understanding of her; it is a cold, clinical account that focuses exclusively on her impairments.

As an OT working with students with disabilities, you will often hear and may have written impairment-driven descriptions of students and, thus, you will need to work to understand these students through their strengths, gifts, and talents. You may read a student's IEP, and it might abound with terms such as *mental age of 2*, *phobic*, or *aggressive*. Reading those descriptors, you will need to realize that you are getting only one perspective on the student. Get to know the student yourself, develop an authentic relationship, and work to learn about what he or she can do. Ideally, your descriptions of a student would look much closer to the parents' perspective on Shawntell than that of the teachers.

BEGIN WITH STRENGTHS

We were talking to Ben, an OT, and asked him to describe Tyler, a student who receives related services. He described Tyler as autistic, sensitive, a runner, loud, sometimes sweet, a mover, and nonverbal. These descriptions speak to Ben's own beliefs about the student. On a piece of paper, write down the first 10 descriptors that come to mind when you think of an individual student. Now, look over the list. Were your descriptors positive, negative, or a combination?

Your beliefs about a student will affect how you support and work with that student. For example, if you believe a student is lazy or defiant, you will approach him or her in a different way than you will if you believe that child is motivated or cooperative. You can alter your beliefs about students by spending some time rethinking them. Reframing your conceptions of students in more positive ways creates opportunities for growth.

Consider the work of educational researcher Thomas Armstrong (2000a, 2000b) on using multiple intelligences theory in the classroom. Armstrong recommended that education professionals purposefully rethink the ways they describe students. By changing their language, people will begin to change their impressions. Armstrong emphasized that all behavior is part of the human experience and that behavior is based on a multitude of influences (e.g., environment, sense of safety, personal well-being). Armstrong has proposed that, instead of considering a child learning disabled, people should see the child as *learning differently*. Table 5.1 lists further suggestions for describing students.

**Table 5.1.** Turning lead into gold

A child who is judged to be	Can also be considered
Learning disabled	Learning differently
Hyperactive	Kinesthetic
Impulsive	Spontaneous
ADD/ADHD ^a	A bodily kinesthetic learner
Dyslexic	A spatial learner
Aggressive	Assertive
Plodding	Thorough
Lazy	Relaxed
Immature	Late blooming
Phobic	Cautious
Scattered	Divergent
Daydreaming	Imaginative
Irritable	Sensitive
Perseverative	Persistent

From Armstrong, T. (2000a). "Table 10-1: Turning lead into gold", from *IN THEIR OWN WAY* by Thomas Armstrong, copyright © 1987, 2000 by Thomas Armstrong. Used by permission of Jeremy P. Tarcher, an imprint of Penguin Group (USA) LLC.

^aADD, attention deficit disorder; ADHD, attention-deficit/hyperactivity disorder.

What would happen if all education professionals changed how they viewed and spoke about students? What if every student was viewed as a capable learner? One of the best ways to think about the students you support is to look at the child through the lens of his or her strengths. Ask yourself the following questions: "What can this student do?" "What are this person's strengths?" "How would a parent who deeply loves this student speak about him or her?" Now, return to your list and take a moment to develop a list of strengths, gifts, and interests.

During a professional development day with general educators, special educators, therapists, and paraprofessionals, Suzie did just that. First, she wrote a list of descriptors. Then, after spending some time rethinking the student, she came up with a completely different list. She had originally described the student, Brian, as "lazy, smart, sneaky, a liar, cute, cunning, and mean (at times)." After talking about viewing students differently, she got a new piece of paper. She wrote, "relaxed, intelligent, good in math, cute, needs some support with peer relationships, a great sense of humor, and a beautiful smile." We asked Suzie whether this still accurately described Brian. She said that the second list was a much more accurate description of him.

MULTIPLE INTELLIGENCES

There is a pervasive myth in education that some people are smart and others are not. *Intelligence, functioning level, academic potential, and competence* are words



often used to describe “smartness.” In education, this belief can best be seen through the system of labeling people with disabilities. A clear example is IQ testing. Students take IQ tests, and if a student’s IQ score falls below 70 and he or she has other issues with functional skills, the student receives the label of ID. Howard Gardner (1993) challenged the way psychologists and educators defined intelligences and offered a different way to look at intelligence. He used the term *multiple intelligences*.

Gardner viewed each of the multiple intelligences as a capacity that is inherent in the human brain and that is developed and expressed in social and cultural contexts. Instead of viewing intelligence as a fixed number on an aptitude test, Gardner argued that every person, regardless of disability label, is smart in different ways. All of the eight intelligences are described in Table 5.2. We have also added a column entitled “So support using,” which might help you think of the students to whom you provide occupational therapy services. If you work with a student who prefers to learn in a certain intelligence area or who is strong in a certain area, consider some of the suggested activities and teaching styles.

Table 5.2. A guide to supporting through multiple intelligences

Intelligence	Which means	So support using
Verbal/linguistic intelligence	Good with words and language, written and spoken	Jokes, speeches, readings, stories, essays, the Internet, books, biographies
Logical mathematical intelligence	Preference for reasoning, numbers, and patterns	Mazes, puzzles, time lines, analogies, formulas, calculations, codes, games, probabilities
Spatial intelligence	Ability to visualize an object or to create mental images or pictures	Mosaics, drawings, illustrations, models, maps, videos, posters
Bodily kinesthetic intelligence	Knowledge or wisdom of the body and movement	Role-playing, skits, facial expressions, experiments, field trips, sports, games
Musical intelligence	Ability to recognize tonal patterns including sensitivity to rhythms or beats	Performances, songs, instruments, rhythms, compositions, melodies, raps, jingles, choral readings
Interpersonal intelligence	Good with person-to-person interactions and relationships	Group projects, group tasks, observation dialogues, conversation, debate, games, interviews
Intrapersonal intelligence	Knowledge of an inner state of being; reflective and aware	Journals, meditation, self-assessment, recording, creative expression, goal setting, affirmation, poetry
Naturalistic intelligence	Knowledge of the outside world (e.g., plants, animals, weather patterns)	Field trips, observation, nature walks, forecasting, star gazing, fishing, exploring, categorizing, collecting, identifying

Sources: Armstrong (2000a, 2000b); Gardner (1993).



PRESUME COMPETENCE

In the school setting, assumptions about students can affect their education. Take Sue Rubin, for instance.

Sue, a student with autism, had no formal way of communicating until she was 13 years old. Before that time, she had been treated and educated as if she had a mental age of 2 years old. Mental age is often based on a person's score on an IQ test. For example, if a 14-year-old girl's score on an IQ test was the score of a "typical" or "normal" 3-year-old, she would be labeled as having the mental age of a 3-year-old. This is not a useful way to think about intelligence. When Sue acquired a form of communication called *facilitated communication*, those long-held assumptions were no longer valid. People began to realize that she was very smart. She subsequently took advanced placement classes all through her high school career, and she is now in college. (Biklen, 2005; Rubin, 2003)

Because education professionals have no real way of determining what a student understands, they should presume that every student is competent or capable. Anne Donnellan used the term *least dangerous assumption* to describe this idea: "Least dangerous assumption states that in the absence of absolute evidence, it is essential to make the assumption that, if proven to be false, would be least dangerous to the individual" (Donnellan, 1984, p. 24). In other words, it is better to presume that students are competent and that they can learn than to expect that they cannot learn.

Biklen and Burke (2006) have described this idea of presuming competence by explaining that outside observers (e.g., therapists, teachers, parents, paraprofessionals) have a choice: they can determine either that a person is competent or incompetent. The presumption of competence recognizes that no one can definitively know another person's thinking unless the other person can (accurately) reveal it. As Biklen and Burke put it, "Presuming competence refuses to limit opportunity . . . it casts the teachers, parents, and others in the role of finding ways to support the person to demonstrate his or her agency" (2006, p. 167). See Figure 5.1 for a listing of strategies for presuming competence. And because students without language offer us as educators and therapists unique challenges, we have included Figure 5.2, with ideas about how to support those students who do not speak verbally.

AGE-APPROPRIATE LANGUAGE

There is a tendency for people to speak down to individuals with disabilities (as if they were younger than they actually are) because of an assumption that people with disabilities are at younger developmental levels. For example, we have heard someone ask a high school student, "Do you have to use the potty?" You would not ask a high school student who did not have a disability that same question in that same way. Julie also has overheard someone describe a young man with Down syndrome who attends



- Examine your attitude—practice saying, “How can this work?” or “How can this child be successful?”
- Question your stereotypes—how someone looks, walks, or talks does not tell you about how he or she thinks and feels.
- Use age-appropriate talk—examine your tone of voice and topic.
- Support communication.
- Listen openly—work to shed judgments.
- Teach peers and others how to interpret potentially confusing behavior.
- Do not speak in front of someone as if he or she were not there.
- In conversation, refer to the person in a way that includes him or her in the conversation.
- Ask permission to share information with others.
- Be humble.
- If possible, always let the person explain for himself or herself and do not speak for him or her.
- Assume that every student will benefit from learning age-appropriate academic curriculum.
- Look for evidence of understanding.
- Support students to show understanding using their strengths.
- Design adaptations and accommodations to support access to academics.
- Be sure to acknowledge the presence of a person with a disability in the same way you would acknowledge others.
- “If you want to see competence, it helps if you look for it.”

Figure 5.1. Strategies for presuming competence. (Adapted by permission from Kasa-Hendrickson, C., & Buswell, W. [2007]. *Strategies for presuming competence*. Unpublished handout.)

college as “a real cutie.” Individuals with disabilities should be described in accordance with their actual chronological ages.

OTs should treat and work with students in age-appropriate ways. An OT was problem-solving with a team of teachers. The issue was that a ninth-grade student enjoyed *Dora the Explorer* and wanted to reference the characters throughout the English class. To address this issue, the OT ran a “lunch bunch” with other ninth-grade girls at which they discussed age-appropriate music, movies, and television. This exposure to age-appropriate popular culture helped the student to shift interest away from *Dora* and on to more appropriate topics.

PERSON-FIRST LANGUAGE

“If thoughts corrupt language, language can also corrupt thought.”

—George Orwell (1946)

When describing, speaking, or writing respectfully about people who have disabilities, many people use a common language. It is called *person-first language*. The concept of person-first language is simple and is detailed in the following subsections.



“Not being able to speak is not the same thing as not having anything to say.”

—Rosemary Crossley

A note on communication: All students who struggle with communication deserve to have a generative communication system in place so that they can express thoughts, feelings, ideas, critiques, and requests. This may include the use of sign language, an augmentative communication device, strategies to teach a person to type or point to communicate, and/or the use of eye gaze or blinking to indicate choices. While it is the right of all students to have a communication system, many students go without any way to share their thoughts.

The strategies that follow are useful in supporting a student who has an effective communication system or a student who does not have a system in place. If a student does not have a system in place, it is imperative that the team consults with a speech-language pathologist who is skilled in implementing augmentative communication systems that would meet the need of the individual child.

Keep Respect and Humanness First

- Never talk about someone as if he or she were not there. Always acknowledge the person's presence and make sure that communication in the child's presence is respectful.
- Some people may not be able to communicate that they understand what you are saying or that they are listening; assume they are listening and understand what you are talking about.
- Question your stereotypes—how someone looks, walks, or talks does not tell you about how they think and feel.
- If a student uses a wheelchair, stutters, flaps hands, or does not make eye contact, this does not mean that he or she cannot learn high-level academics, does not desire to make friends, and does not want the chance to voice independence. Work to open up opportunities.
- In conversation, refer to the person in a way that includes him or her in the conversation. For example, when Ms. Mayfield began to read the book *Splish Splash* to the class, she said, “Maya, you are going to love this book—it is all about swimming.” Maya is a student who does not speak to communicate. When Ms. Mayfield shared in front of the class that Maya will enjoy this book, she taught that Maya has interests and ideas that are similar to those of her peers. In doing this, Maya did not have to respond or say anything, but her active participation and competence were made clear by her teacher's public acknowledgment.
- Ask permission to share information with others. Too often, students with disabilities do not have any privacy. Be sure not to share information on using the restroom, sexuality, health, family, embarrassing situations, and/or relationships. Ask first, and err on the side of privacy always.

Embrace a Strength-Based Attitude

- Embrace an optimistic attitude. Practice saying, “How can this work?,” “How can this child be successful?”
- Work with family members to identify the student's strengths and design methods to include the student in the general education classroom using those strengths.
- Teach students to identify and use their own strengths.
- When the going gets tough, write down a list of a student's strengths and strategies to help you spring into action and begin to problem solve (see <http://www.paulakluth.com/readings/inclusive-schooling/strengths-and-strategies/>).

Please Act My Age: Age-Appropriate Talk and Materials

- Talk in an age-appropriate manner, using age-appropriate content. A singsong voice or a tone typically used with a young child should be reserved for babies and toddlers; be sure to check your tone of voice and the content you are talking about.
- Be sure as a teacher to acknowledge the presence of a person with a disability in the same way you would acknowledge other students.

Figure 5.2. Guidelines for supporting the active participation of nonverbal students in school. (From Kasa, C., & Causton-Theoharis, J. [n.d.]. *Strategies for success: Creating inclusive classrooms that work* [pp. 16–17]. Pittsburgh, PA: The PEAL Center. Retrieved from http://wsm.ezsitedesigner.com/share/scrapbook/47/472535/PEAL-S4Success_20pg_web_version.pdf)



- Let students make mistakes, get in trouble, and act out. Be sure they have the opportunity to talk and play with peers without adult interaction.

Learning to Talk to Someone Who Does Not Speak

- While teaching, be sure to acknowledge the nonverbal student's presence often. You should not go an entire lesson without saying, "Sean, I bet you'll like this part. I know you like to ski with your family," or "Megan, I see you smiling. I am sure you will like learning about volcanoes."
- Take every opportunity to teach peers how to talk to people who communicate differently. Talk about current events, age-appropriate interests, things you like to do, places to go, events around school; also, use their communication strategy to enable them to make lots of choices throughout the day: food to eat, materials to use, where to sit, what to read, what to play. Ask their opinion on various topics.

Use Communication Methods Efficiently and Often

- If a student uses a yes/no communication strategy, be sure to use this during a lesson. You can do this during a whole-group lesson by saying, "Do you all think that $5 \times 5 = 25$?" Or do this in an individual way: "Was Harry a hero in the story?" This will allow the student to use his or her yes/no strategy and be included in the lesson. If he or she answers incorrectly, then you can say, "Oh, I don't think that is quite right. Does anyone have other ideas?"
- If the student uses an augmentative communication system, you need to be sure to have them utilize it throughout the lesson. Make sure the device is ready to go with content related to the lesson so that the student can participate.

Teach Peers to Support and Understand Confusing Behavior

- Use partners during lesson activities. Model and encourage peers to talk about topics with each other. This can be done in cooperative learning groups or with peer activities such as think, pair, and share or turn and talk (see Udvari-Solner & Kluth, 2008).
- Be sure to include the student in the academic curriculum in the classroom. Assume learning is possible and ask content-related questions.
- Teach peers and others how to interpret potentially confusing behavior and support each other.

Assume Benefit from Academic Learning and Look for Understanding

- Assume that every student will benefit from learning age-appropriate academic curriculum.
- Look for evidence of understanding. This will occur in unique instances and times.
- Support students to show understanding using their strengths.
- Design adaptations and accommodations to support access to academics.

Figure 5.2. (Continued)

The Same as Anyone Else

Think first about how you might introduce someone who does not have a disability. You might use the person's name, say how you know him or her, or describe what he or she does. The same is true for individuals with disabilities. Instead of saying, "Pat who has Down syndrome," you might say, "Pat who is in my fourth-grade class." No one should be identified by one aspect of who he or she is, especially if that aspect represents a difficulty or struggle. Ask yourself why you would need to mention that the person has a disability.



Words are powerful. The ways we talk about and describe people with disabilities do not just affect our beliefs and interactions with our students; they also provide models for others who hear these descriptions.

If your own child broke his arm, would you introduce him to someone new as “my broken-armed child”? If one of the students in the school had cancer, would you expect to hear a teacher state, “She is my cancerous student”? Of course not. No one should feel ashamed about having a broken arm or having cancer, but regardless, a broken bone or malfunctioning cells do not define a person.

Avoid the Label

Would you like to be known for your medical history? Probably not. The same is true for people with disabilities. Yet, students with disabilities are invariably described with labels instead of person-first language. Have you ever heard phrases such as *the learning-disabled student*, *the autistic boy*, *that Downs child*, *the resource room kids*, or *the inclusion kids*?

It is important to understand the preferences of people with disabilities regarding how they would like others to speak about them. The guidelines listed in Table 5.3 come from two self-advocacy groups (Disability is Natural and TASH).

COMMONLY ASKED QUESTIONS ABOUT RETHINKING STUDENTS

- Q. What if a student prefers an age-inappropriate toy or game?
- A. Often, people with disabilities have been treated as if they were younger than they are. As a result, they have been exposed to cartoons, dolls, or games to which their same-age peers have not been exposed; their peers are not likely to think these activities are cool. One option, then, is to expose the student to more age-appropriate music and activities.
- Q. Are there any exceptions to person-first language?
- A. Yes—people who are deaf often prefer the term *deaf* instead of *person with deafness*. A group called Deaf First suggests that deafness is a major component of identity, and this group prefers disability-first language. Some people with autism prefer to be called *autistic*, and some use insider language such as *autie* to describe themselves. It is inaccurate to say that all people with disabilities prefer one way over another. Person-first language serves as a helpful guideline because many advocacy groups consider it a respectful way to refer to people.



- Q. I do not think the student I work with is smart. This student has a label of ID. How can I presume competence?
- A. This person may not perform well on standardized tests of intelligence. However, your responsibility when working with this student is to identify the student's strengths. Keep those strengths in mind. Every person is intelligent in different ways.

Table 5.3. Examples of person-first language

Say	Instead of	Because
People with disabilities	The disabled or handicapped	Place emphasis on the person.
People without disabilities	Normal/healthy/typical	The nonpreferred terms assume the opposite for students with disabilities (i.e., abnormal, unhealthy, atypical).
Ella, the fourth-grade student	Ella, the student with Down syndrome	Omit the label whenever possible; it is most often not relevant.
Communicates with her eyes/ device, and so forth	Is nonverbal	Focus on strengths.
Uses a wheelchair	Is confined to a wheelchair	Use possessive language to refer to assistive technologies; the nonpreferred language implies the person is "stuck."
Accessible parking spot	Handicapped parking spot	Accurate representation
Beth has autism.	Beth is autistic.	Emphasize that disability is one attribute—not a defining characteristic.
Gail has a learning disability.	Gail is learning disabled.	Emphasize that disability is one attribute—not a defining characteristic.
Jeff has a cognitive disability.	Jeff is retarded.	Emphasize that disability is one attribute—not a defining characteristic; also, <i>cognitive disability</i> is a preferred term.
Ben receives special education services.	Ben is in special education.	Special education is a service, not a place.
The student who is blind	The blind student	Place the person before the disability.
Denis writes using the computer.	Denis cannot write with a pencil.	Focus on strengths.
Needs a magnifier, laptop, or cane	Problems with vision; cannot write or walk	Focus on needs, not problems.

Source: Snow (2008).



Throughout history, people with physical and mental disabilities have been abandoned at birth, banished from society, used as court jesters, drowned and burned during The Inquisition, gassed in Nazi Germany, and still continue to be segregated, institutionalized, tortured in the name of behavior management, abused, raped, euthanized, and murdered.

Now, for the first time, people with disabilities are taking their rightful place as fully contributing citizens.

The danger is that we will respond with remediation and benevolence rather than equity and respect.

And so, we offer you

A Credo for Support

Do not see my disability as the problem.
Recognize that my disability is an attribute.

Do not see my disability as a deficit.
It is you who see me as deviant and helpless.

Do not try to fix me because I am not broken.
Support me. I can make my contribution to the community in my own way.

Do not see me as your client.
I am your fellow citizen.

See me as your neighbour.
Remember, none of us can be self-sufficient.

Do not try to modify my behavior.
Be still and listen. What you define as inappropriate may be my attempt to communicate with you in the only way I can.

Do not try to change me, you have no right.
Help me learn what I want to know.

Do not hide your uncertainty behind "professional" distance.
Be a person who listens and does not take my struggle away from me by trying to make it all better.

Do not use theories and strategies on me.
Be with me.
And when we struggle with each other, let that give rise to self-reflection.

Do not try to control me. I have a right to my power as a person.
What you call non-compliance or manipulation may actually be the only way I can exert some control over my life.

Do not teach me to be obedient, submissive and polite.
I need to feel entitled to say No if I am to protect myself.

Figure 5.3. A credo for support. (From Kunc, N., & Van der Klift, E. [1996]. *A credo for support*. Vancouver, British Columbia: The BroadReach Centre; reprinted by permission.)



Do not be charitable towards me.
The last thing the world needs is another Jerry Lewis.
Be my ally against those who try to exploit me for their own gratification.

Do not try to be my friend. I deserve more than that.
Get to know me, we may become friends.

Do not help me, even if it does make you feel good.
Ask me if I need your help.
Let me show you how you can best assist me.

Do not admire me.
A desire to live a full life does not warrant adoration.
Respect me, for respect presumes equity.

Listen, support, and follow.

Do not work on me.
Work with me!

Figure 5.3. (continued)

CONCLUSION

Remember, disability labels are not accurate descriptors of people. Children who have disabilities are unique individuals with unlimited potential, just like everyone else (Snow, 2008). This recognition is not only about having a good attitude or believing that all students are smart; it also will allow you to treat, support, provide services to, and work with all students in ways that promote dignity and respect. The Credo of Support poignantly reveals the importance of rethinking students (see Figure 5.3). In Chapter 6, we discuss how the ideas of dignity and respect can help facilitate social relationships.

