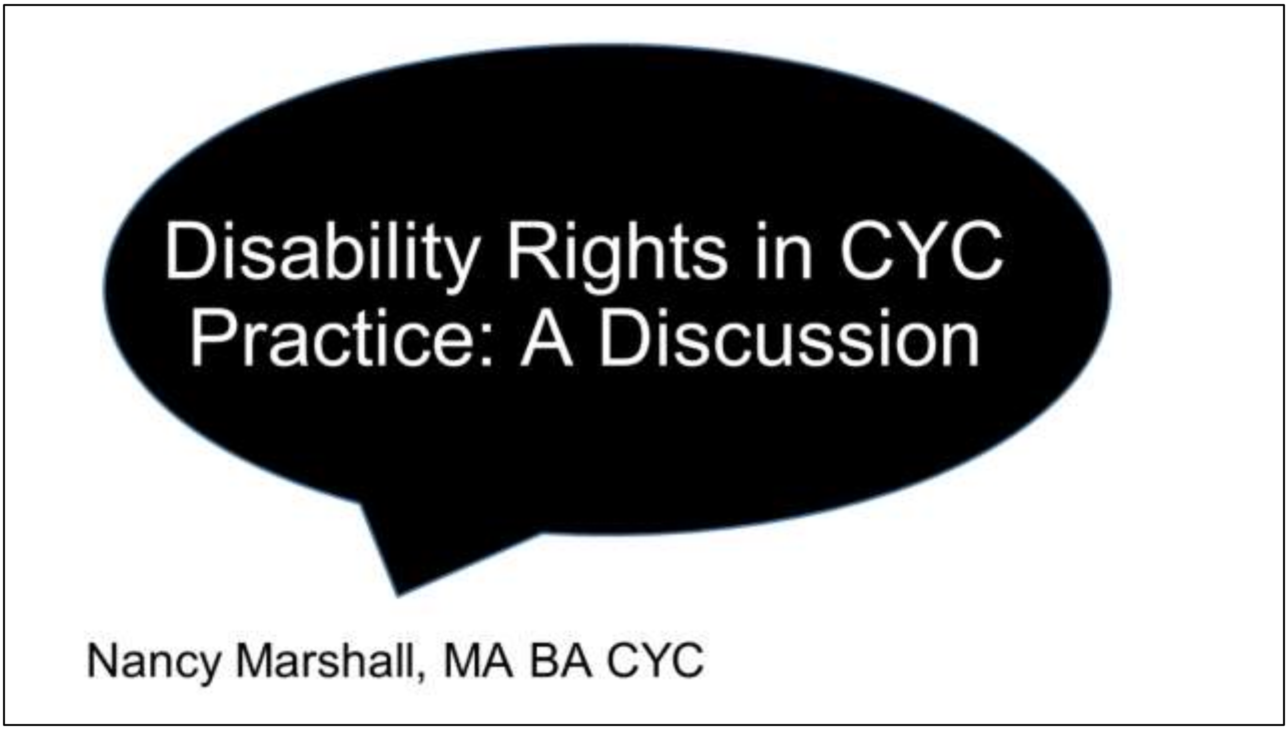


Disability Rights in CYC Practice: A Discussion

Nancy Marshall, MA BA CYC

Slide 1:

Welcome everyone and thank you so much to Kibble and CYC-Net for providing this opportunity to present on such an important topic- one that I feel Child and Youth Care (CYC) workers everywhere are interested in yet do not talk about enough.

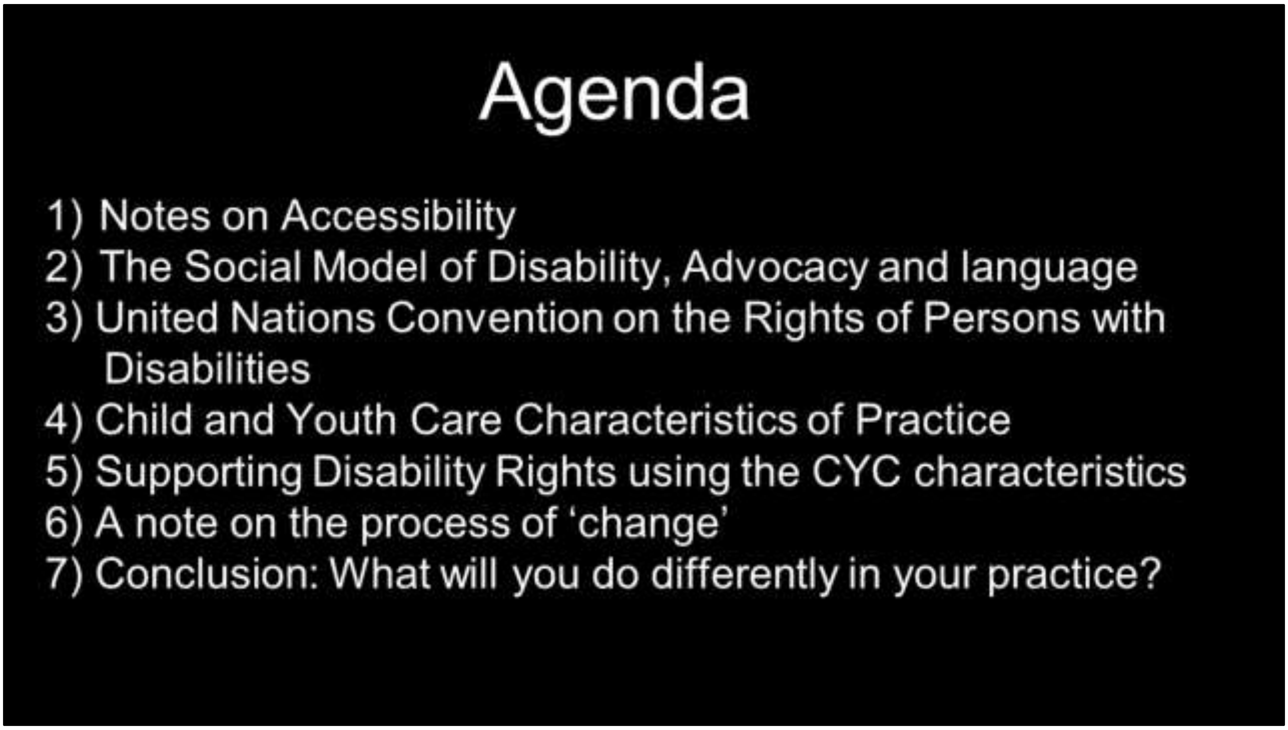
I have been working with autistic and disabled young people for over ten years in classroom autism programs and in the community. My aim today is to open up the topic of disability rights so that they can be discussed and practiced more within our various youth support settings – whether those settings be residential care, hospitals, schools, family homes, or anywhere in the community. Also, my aim is to explore the CYC characteristics of practice as a framework to discuss how we can support the realization of disability rights. Today will be more of a discussion than a lecture with lots of opportunity to reflect. I think it is important to recognize that I am by no means an expert on this topic. I can learn as much from you as I hope you can from this short presentation. Today is an opportunity to start reflecting together and continue the conversation!

I would like to start with a **Poll**:

What are your experiences with young people with disabilities?
Answers:

I have family members and/or friends with a disability
I support or have supported disabled young people in my work setting
I have no experience with young people with disabilities
I have a disability or I am disabled myself (If you have a preference for identity first or person first language to describe your identity please let us know in the chat box).

Thank you all for sharing your thoughts. It is always nice to start off knowing where people come from and what experiences they have.



Agenda

1) Notes on Accessibility
2) The Social Model of Disability, Advocacy and language
3) United Nations Convention on the Rights of Persons with Disabilities
4) Child and Youth Care Characteristics of Practice
5) Supporting Disability Rights using the CYC characteristics
6) A note on the process of ‘change’
7) Conclusion: What will you do differently in your practice?

Side 2:

Without further ado, here is our agenda for today:

Notes on Accessibility

Slide 3:

We have made every attempt today to make this webinar accessible to people with disabilities.

I will be sticking very closely to the script so that those following along at home do not miss anything. Any extra verbalized comments I make I will type out in the chat box. I will also be reading comments from you as we go along. All of these comments can be viewed in text on the screen and in the text box. For those who need it- the chat box has a text adjustment so that you can increase font size.

In addition, I will be reading out ‘image descriptions’ for all slides with images to accommodate for vision disabilities.

If you have any questions, please let us know in the chat box. Also, if I speak too fast or if anything is hard to read, understand, or see, please let us know.

Slide 4:

In this image, there is a dark haired man in a blue suit standing with his hands on his hips, and his back to us, in a large grey empty room. He is looking at a wall which has a short red ladder leaning against the wall. Above the ladder is a white wooden door which is about 10 feet out of reach of the ladder. The door is inaccessible as the ladder is much too short to reach the door.

Now, lets gently challenge each other. We live in an inaccessible world. Thank you to my colleague Jessica Koury for inspiring this as the first topic for discussion today. Think about it. We live in an inaccessible world.

Short answer question:
How does living in an inaccessible world make disabled folks feel in the day to day? Can you provide one or two words that might describe their feelings? I will start: 'disempowered'

Thank you for all of those thoughts. Inaccessibility comes from the neglect to accommodate disabilities of all types, whether they be physical or not. This happens daily. I will use an example from my own professional practice. I am not proud to admit that, until now, I have never thought about making my conference presentations or webinars accessible to disabled people. This is a big deal for me as a CYC practitioner who advocates for disability rights.

At times, we may all neglect to accommodate disabilities, especially if we do not experience disabilities ourselves; it is not a perfect world and we are not perfect people.

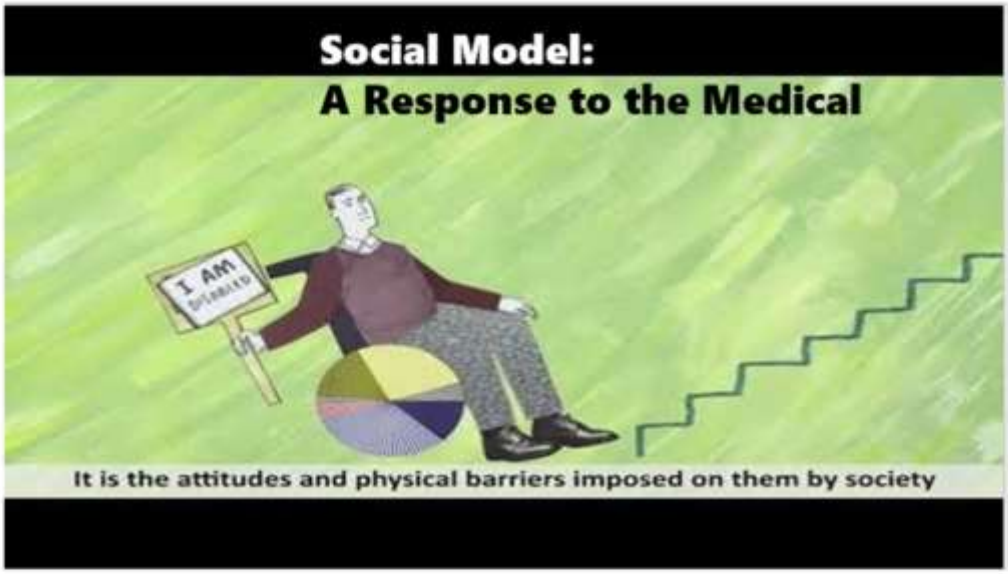
Poll: Have you ever forgotten or neglected to accommodate for disabilities?
Answers:

- **Yes**
- **No**
- **I am not sure**

I think that it is important that we are critically self reflective so that we can recognize these mistakes and learn from them. Last year, I wrote an article on this topic for the Relational Child and Youth Care Journal:

http://www.rcycp.com/docs/RCYCP_Vol30-2_sample.pdf

I would like to share that paper with all of you. Evelyn will make it available in a follow-up email after this presentation. In this article, I share several of the mistakes I made with autistic young people and how I learned from those mistakes. The point is, we may never be perfect but that should never be an excuse not to accommodate. We need to accept our mistakes and try our very best not to make them again.



Slide 5:

In this image, against a light green water colour backdrop, there is a drawing of a middle-aged white man sitting in a wheelchair holding a sign that reads: “I AM DISABLED”. He is sitting at the bottom of a staircase with a distraught look on his face. The image has text that reads: “Social Model: A Response to the Medical Model. It is the attitudes and physical barriers imposed on them by society.”

Poll: Have you heard of the social model of disability before?
Answers:
    Yes
    No

I am going to play a short video now that gives a nice synopsis of what the social model is:

<PLAY VIDEO> https://www.youtube.com/watch?v=24KE__OCKMw&t=31s

This video was provided courtesy of The National Disability Arts Collection:
https://the-ndaca.org/
Please explore their website and promote their message.

In my opinion, the social model is one of the greatest milestones for disability activism in history. It set a precedent that people are ‘dis-abled’ by society. This realization has led to developing essential disability rights legislation around the world. When I learned of this model in my undergrad, a cognitive shift happened for me- I understood the word ‘disabled’ was not deficit-based. I encourage everyone to reflect on that- disability is nothing for individuals to be ashamed of. It is very debilitating at times but it is not the individual’s fault that the world does not accommodate them. In this way, society ‘dis-ables’ people.

Please note that there are some important critiques to the social model that exceed the discussion here today. If you are interested in this further discussion, please email me after the webinar.

Slide 6:

Now, I would like to draw attention to advocacy and language for a moment. In this image there are three comic panels, one on top of another. In the top panel, there is a colorful cartoon drawing of a young white girl with bright pink hair and a light blue shirt. Behind her is a speech bubble with the word ‘autism’ written in rainbow colours. The text reads: “You cannot separate me from my autism”.

In the middle panel is an image of a twisted rope draped from corner to corner drawn with the colours of the rainbow. The text in this panel reads: “Autism is intertwined into my identity. It is who I am”. The bottom panel of the comic simply reads: “I am autistic” in rainbow coloured bubble letters.
This comic was drawn by Doodle Beth. Please follow her art and advocacy here and donate to her page if you can:

http://doodlebeth.com/

So far in this presentation, I have used the terms ‘person with disability’, disabled people, young people with autism, and autistic young people.

Poll: When I use the identity-first choice of language, ie: ‘autistic young people’ and ‘disabled people’, does it make you feel:
Answers

Uncomfortable because I have been taught to say ‘person with autism’ or ‘person with disability’
Indifferent
Grateful because I prefer identity-first language

As care professionals, we are often taught to use person-first language. However, identity-first language is a choice advocated by many disabled folk. This choice has gained much popularity due to the social model of disability and other advocacy movements. Basically, the identity-first language advocates believe that to say ‘with disability or ‘with autism’ means that there must be something inherently wrong with disability and autism. When they say ‘disabled’ or ‘autistic’, it means there is nothing to be ashamed of and they are proud of who they are, They embrace this descriptive adjective much like those who identify as ‘queer’.

There are also people with disabilities who prefer ‘person-first’ language (i.e., ‘I have a disability’ or ‘I have autism’) and that is also their right. There is pride and advocacy for human rights from both perspectives- always ask the person you are working with to be sure of their preferred choice. Here are some links to help you understand it better:

http://autisticadvocacy.org/about-asan/identity-first-language/
http://www.apa.org/pi/disability/resources/choosing-words.aspx

Slide 7:

In this image, there is a photograph of a crowd of disabled folk on Downing street in London, UK. There are people in wheel chairs, people with canes, and other people walking without any assistive equipment. They are holding signs that read “We want full inclusive rights” and other signs promoting disability rights messages.

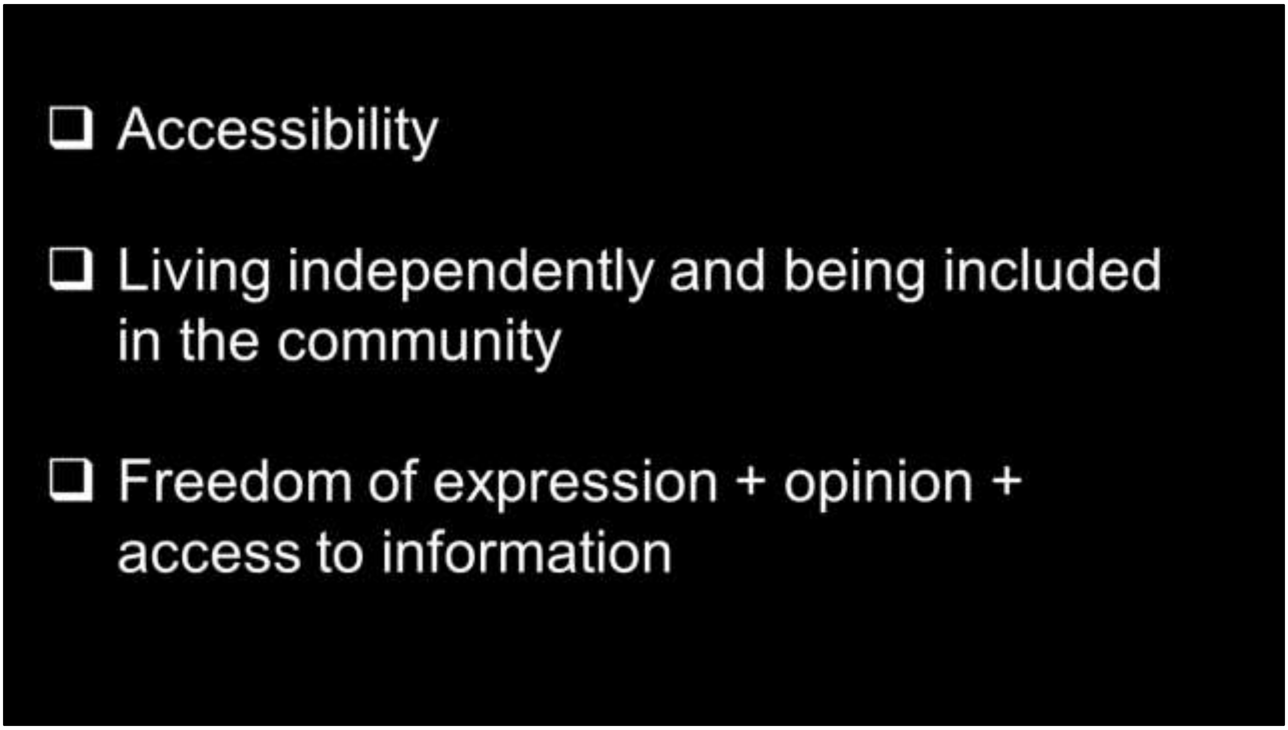
This photo was taken in September 2016 and represents the continued protests that have occurred around the world as activists advocate for their basic rights to inclusion, health, education, employment and participation in society.

Through decades of these efforts, the United Nations Convention for the Rights of Persons with Disabilities (UNCRPD) was finally adopted in 2006. In Canada, it was not ratified until 2010. Please see this link for more information and the full document:

https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html

The United Nations is committed to changing attitudes that view people with disabilities as objects in need of charity, treatment, and protection. Instead, the

UNCRPD views people with disabilities as free thinking and independent subjects who are capable of consenting to their own health and their own needs. Today, we will touch on a few rights listed in this convention that I feel will be most relevant for this introductory session.



- ☐ Accessibility
- ☐ Living independently and being included in the community
- ☐ Freedom of expression + opinion + access to information

Slide 8:

On this slide, I have listed three important disability rights:

  Accessibility
  Living independently and being included in the community
  Freedom of expression + opinion + access to information

In 2016 here in Ontario, our Provincial Advocate for Children and Youth published a document called the ‘We Have Something to Say’ (WHSTS) report that included the voices of over 170 children and youth with disabilities, including 7 young people who I supported. In this report, young people described inaccessible education and employment services; frustration about overprotective adults who prevent them from becoming independent citizens; and, feeling left out of important decisions that impacted their lives. The overall message was that they are often treated as young, incapable people in need of help and charity. Please find the full WHSTS report here:

https://www.provincialadvocate.on.ca/initiatives/we-have-something-to-say/resources/we-have-something-to-say-report-en.pdf

Although this is a narrow study that focuses only on the voices of young people in Ontario, it likely echoes the frustrations of young people across the globe. Global statistics reveal disabled people are continually excluded from quality education, employment opportunities, and participation in society.

Short Answer Question:
Would anyone like to give an example of how these rights have been denied to young people from their own experience?

Prompts for chat box:

In the classrooms I work in, students with disabilities are often asked to write or type out answers when ‘speech-to-text’ is supposed to be offered as an accommodation for them;

In Ontario, autistic young people are often suspended, expelled or asked to attend half days when they ‘act out’ aggressively because their rights have been denied on a daily basis;

When they express their concerns about being bullied, they are often asked to just ‘stay calm’ and ‘self-regulate’.

Thank you for your examples.

- ☐ Education
- ☐ Health (including consent to treatment)
- ☐ Work and Employment
- ☐ Participation in cultural life, recreation, play and sport

Slide 9:

On this slide I have listed four more important disability rights:

Education;
Health including consent to treatment);
Work and Employment;
Participation in cultural life, recreation, play and sport.

Short Answer Question:
From your own experience, can anyone share an example of how young people have successfully realized any of these rights?

Prompts for chat box:

My place of work is getting much better at incorporating technology to accommodate various accessibility needs.
More studies and literature are being published that amplify the voices of disabled youth so that we can accommodate them better.
More of my students are looking forward to graduating from College and University!

Again, thank you for those. I think it is extremely important that we look at the successes along with the challenges!

d from Research Gate: https://www.researchgate.net/figure/308202341_fig

Slide 10:
So now the fun part!

Evelyn sent you this diagram and an article on the 25 characteristics of CYC practice, I hope you all had time to review it: **https://cycminded.files.wordpress.com/2017/03/garfat-fulcher_characteristics-relational-cyc-approach-1.pdf**

This image depicts the B.I.D (BID) model of CYC characteristics organized by Thom Garfat and James Freeman into 3 categories: Being, Interpreting, Doing. The articulation of the characteristics was initiated by Thom Garfat’s work in the field, and is informed by the ideas of young people and practitioners across the globe.

I believe that if we look to the Characteristics of CYC practice as a model for how we do what we do, then it is helpful to also look at them through different lenses- today we will explore them through a disability rights lens.
I will give you a brief synopsis of the three domains- thanks to James Freeman for organizing them this way!

Being- this domain is pretty simple, yet quite complex. As with all the domains, there are many characteristics that intertwine and interconnect to make responsible and ethical practice. When being with young people, we hang out, hang in, work with them, and counsel them on the go. We use intentionality to show them that they matter, no matter what is going on for the in any particular moment.

Interpreting- We always have to remember that everyone interprets things in their own unique way. So, when we look at a young persons needs, make meaning out of experiences, work with their families, and respond to them, etc., we must always be sure we are truly recognizing the young person's needs accurately, while reflecting on our own interpretations of their needs as well. Using characteristics within this domain, allows us to really work toward a disabled young person's right to autonomy and independence.

Doing- I find this domain really brings together all the characteristics of our practice into purposeful interventions that work for young people. My favorite characteristic here is 'do with not for or to'. This is actually a motto of the disability community- 'Nothing about us without us'.
I always look to the characteristics to inform my practice- ALWAYS! I believe that when I do so, I can be truly trauma-informed and anti-oppressive in my support of young people. Especially when I look at utilizing the characteristics through a human rights lens.

- ☐ Education
- ☐ Participation in cultural life/recreation/play/sport
- ☐ Accessibility

Characteristics of Relational Child & Youth Care

Love
Being in relationship
Participating with others as they live their lives
Hanging out
Hanging in
Working in the now
Counseling on the go
Flexibility & individuality

Being
Doing
Interpreting
BID
The meaningful use of daily life events

Slide 11:

Ok, so let’s begin some exercises to apply CYC characteristics of practice to supporting the rights of persons with disabilities.

On the left are three rights taken from the UNCRPD. On the right is the diagram with the characteristics in the domain of ‘Being’.

I will start with an example from the WHSTS report I referred to earlier. The young people in this report felt that teachers had low expectations of them and that their school work was often ‘dumbed down’ compared to their non-disabled peers. The students I worked with last year for example, were upset because their science teacher only gave them cut and paste activities. They did not do experiments and did not use technology. My way of ‘being’ while ‘working in the now’ involved challenging their teacher and assisting students to advocate for their desires. I assisted the teacher with creative ideas when I could.

Now it is your turn.

Short Answer Question:
What ways can you support a young person to realize any one of these basic rights using any of the characteristics in the domain of ‘being’?

Prompts: seek out accessible parks, venues and restaurants to ‘hang out’ in; spend time counselling on the go when barriers arise and advocate along with them- stand up for them in the moment; ‘hang in’ with them when they exhibit challenging behaviours (without imposing rewards or consequences to shape ‘desired’ behaviours); listen to their reasons for engaging in challenging behaviours

Thank you for all of those examples! Let’s move on to ‘Interpreting’.

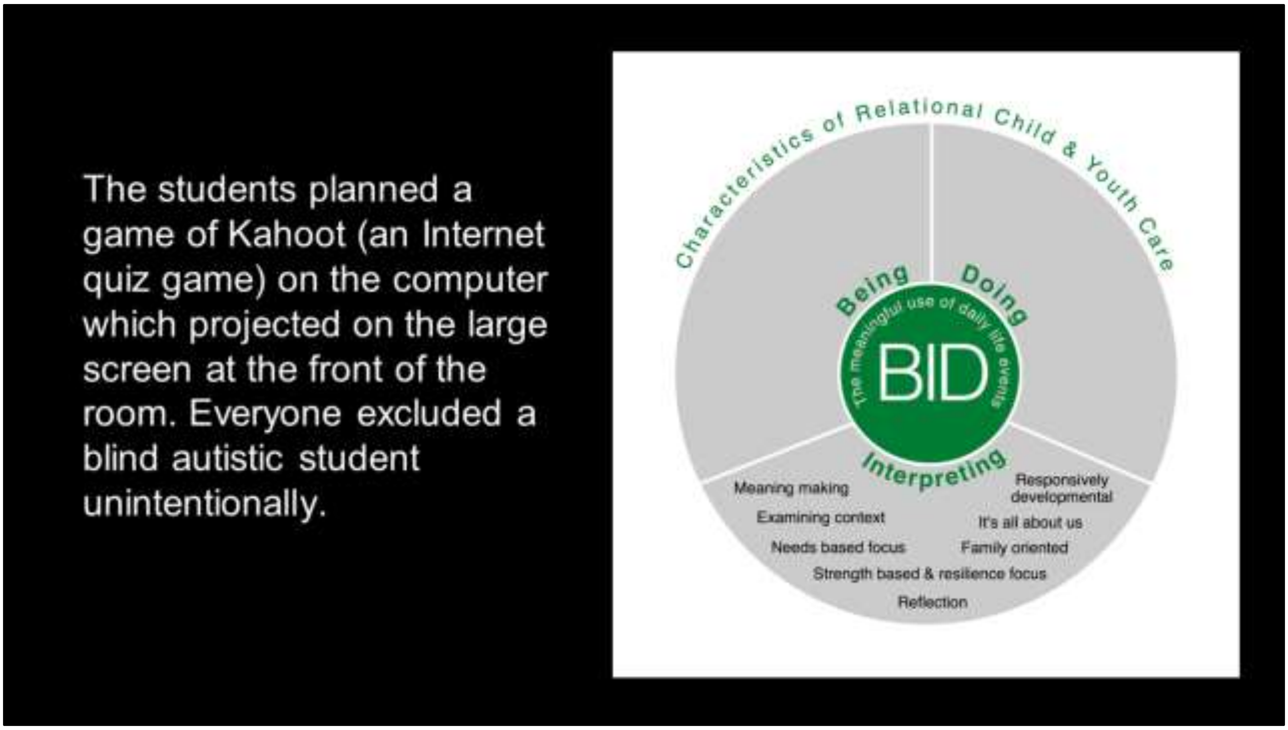
❑ Living independently and being included in the community

❑ Accessibility

Slide 12:

We will do this one a little differently. I am going to hone in here on the right to be included and a needs-based focus. All human needs are human rights- the need for safety, acceptance, inclusion, independence, etc. The right to be included is a basic need for all people with disabilities and it is one that gets denied daily- often multiple times per day. I will give you a recent example of my own experience:

I recently had a student with a vision disability and autism join a friendship club that I supervised at the school I work at. The students planned a game of Kahoot (an Internet quiz game) on the computer which projected on the large screen at the front of the room. Students needed cell phones to play. I asked students to pair up with those who did not have cell phones. It was a large group and I neglected to check if the blind student had a partner (which she did not) and I did not ask the student leader of the game to read out the questions or answers so that she could participate. My colleague at the back of the room noticed and informed me we were excluding this student. We fixed the situation right away but I felt bad all day.



The students planned a game of Kahoot (an Internet quiz game) on the computer which projected on the large screen at the front of the room. Everyone excluded a blind autistic student unintentionally.

Slide 13:

Short Answer Question:
Thinking of this example, and this young person's need for inclusion, what other ways can we support her besides being sure she is accommodated? Remember she experiences this kind of exclusion multiple times per day.

Prompts: support her through listening and reflecting on how daily exclusion impacts her daily life; get to know her family and/or support system and how you can support them in strengthening advocacy for inclusion; give her a safe space to vent frustrations she has; get to know her strengths and interests to provide opportunities for leadership

Thank you for those ideas. Inclusion is one of the biggest denial of human rights for people with disabilities. This constant exclusion leads to trauma, feelings of isolation, loneliness and depression. The young people in the WHSTS report said that depression and suicidal thoughts are common. The number of studies and statistics on depression and suicide for disabled people are numerous and exceed the scope of this webinar but The World Health Organization is a good place to begin this search if you are interested:

http://www.who.int/news-room/fact-sheets/detail/depression

- ☐ Freedom of expression + opinion + access to information
- ☐ Health
- ☐ Work and employment

Slide 14:

Finally, we arrive at the domain of Doing. When I work with young disabled people, I focus on how I can support them in fostering self-determination. Unfortunately, as was also expressed by the youth in the WHSTS report, young people with disabilities are too often told what is best for them and what goals they should set.

When I look at the right to ‘freedom of expression, opinion, and access to information’, I think about how I can respond with intentionality to make sure I never ask them to set goals that are likely meaningless or even harmful to them. Unfortunately, this is done all too often with young disabled people. For example, young people with ADHD are asked to sit still and young people with developmental disabilities are asked to ‘self-regulate’. These expectations are often unfair for young people with biological impairments. Please look to this month’s edition of CYC Online for letters from some of my students as they exercise their right to expression and opinion:

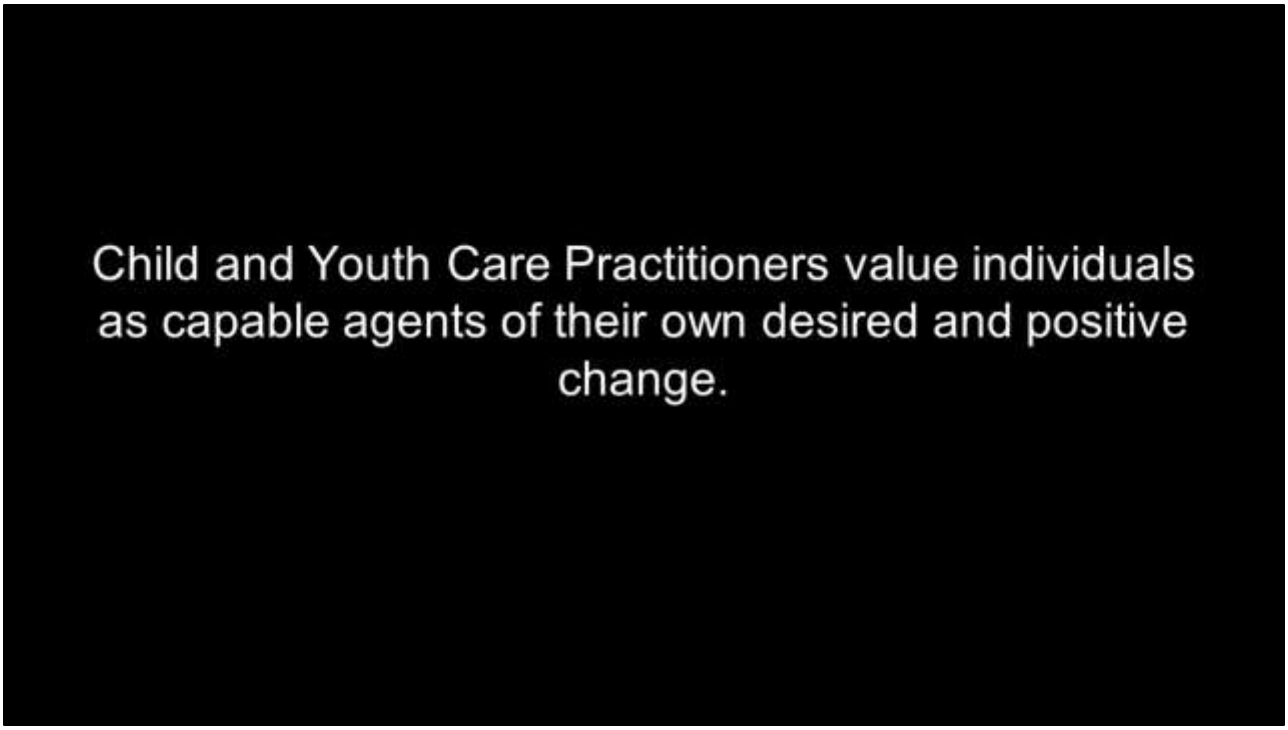
http://www.cyc-net.org/cyc-online/

One of the most compelling statements for me in these letters was when a student said: “I try to make goals but they don’t succeed because I still end up bored and alone…” My most useful intervention with this student is ‘connection and engagement’ and ‘meeting him where he is at’; I often face frustration from teachers who say he ‘lacks motivation, he is lazy, etc”. Teachers just want me to make him realize how he is ‘wasting his potential’. I have done a ton of counselling with this student over the years and very rarely does it include a talk about the importance of his grades. Instead, we discuss the oppression he faces on a daily basis.

Now it is your turn.

Short Answer Question
What ways can you support a young person to realize one of these basic rights using any of the characteristics in the domain of ‘doing’?

Prompts: tour post secondary and workplace programs together; ask young people what goals they really want for themselves; develop rituals, like a secret hand shake, etc, that shows them you are connected and that they matter,



Child and Youth Care Practitioners value individuals as capable agents of their own desired and positive change.

Slide 15:

Thank you all for that really enriching discussion. I want to leave you with a final thought about ‘change’: “Child and Youth Care Practitioners value individuals as capable agents of their own desired and positive change.”

This statement comes from a renewed definition of CYC practice that was created in collaboration with the Ryerson University Master’s program last year. You can find this definition here:

http://www.cyc-net.org/profession/pro-definitions.html

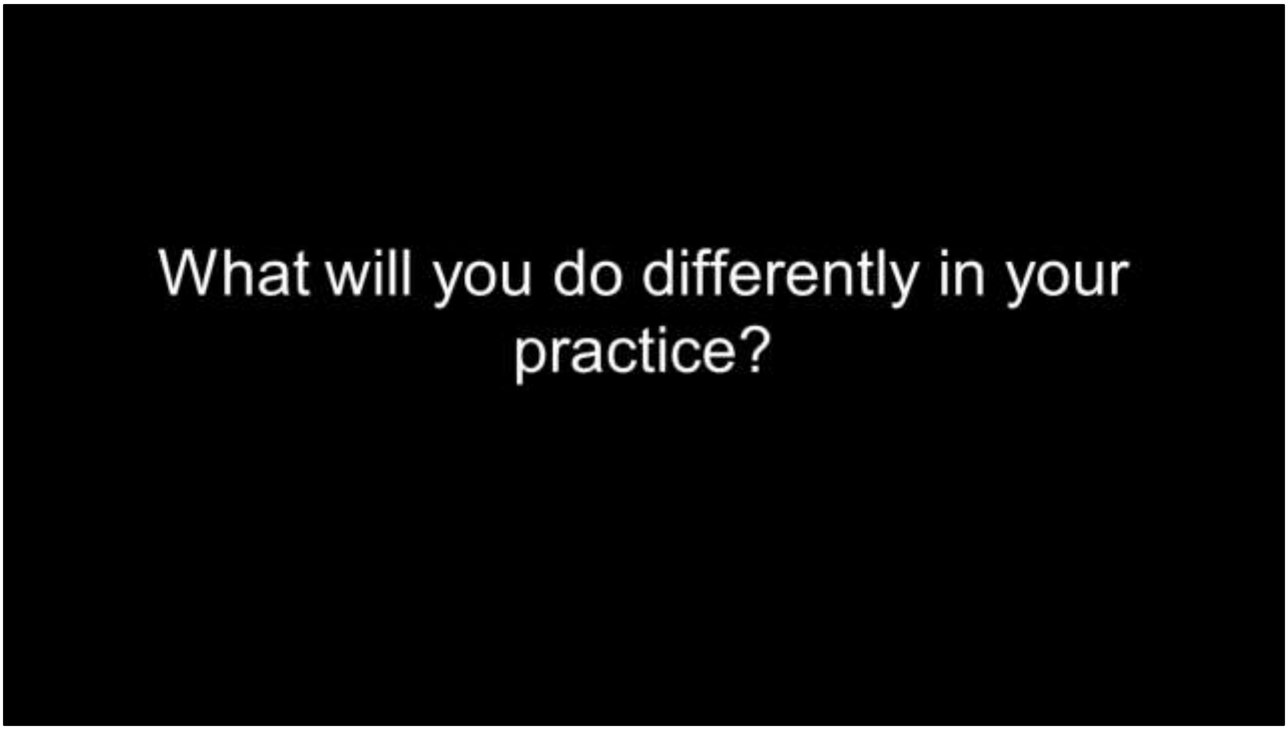
When I did an open access CYC journal search of the term ‘disability’, not much came up about actual CYC practice with this population. One of my favorite resources is actually a discussion on CYC-Net. Here is the link to the thread:

http://www.cyc-net.org/threads/view.html

In this thread, a main point of discussion was how we can foster self-determination in these young people and work more with the environment when facilitating change. **Often, due to the information from medical and psychiatric practices that dominates our literature, we assume our support for disabled young**

people must fall in line with the medical model of doing things- that we need to support young people with their disability rather than with their everyday experiences of oppression. We often do not think enough about possible trauma caused by the medical model that influences their behaviour. In summary, the CYC characteristics, for me, inform a holistic model of support that involves advocating for change in the environment as much as it involves supporting the young person to advocate for change that works for them.

If you will remember back to the United Nations commitment to viewing people with disabilities as free-thinking and independent individuals, you see how closely our CYC values align with disability rights. It is so important that we look to this aspect of our practice when we support people with disabilities.



What will you do differently in your practice?

Now, Last question:
What will you do differently in your practice?

References

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