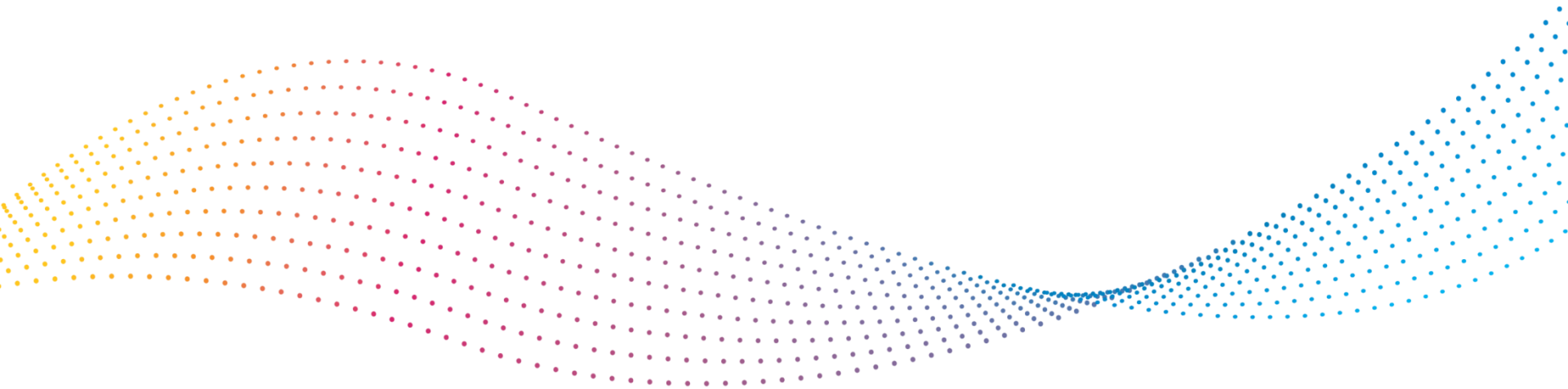


Independent Living Philosophy

More Than A Philosophy. It Is A Lifestyle



Introduction



Welcome to Independent Living Philosophy 101.

The purpose of this course is to give an overview of the philosophy by which many People experiencing disabilities live.

This course will take approximately 30 minutes to complete.

Course Goals

At the end of this module, you will have an understanding of:

- Where Independent Living Philosophy began
- Principles of Independent Living Philosophy
- The Impact on the Lives of Those Who Experience Disabilities
- Social Model Compared to Medical Model
- Communicating with People Who Experience Disabilities



HISTORY



Independent Living began on both coasts in the Mid 60's. Ed Roberts in Berkeley and Judy Huemann in New York City.

Principles of Independent Living Philosophy

- People experiencing disabilities have the right to live as an integral part of the community of their choice
- At the level of involvement they choose
- People experiencing disabilities are not broken and need to be fixed
- People experiencing disabilities should have access to home, work, school, recreation and the supports to participate in Society
- People experiencing disabilities should be a part of the development of the services



Nothing About Us Without Us!!!

Principles of Independent Living Philosophy

- People experiencing disabilities have the right to dignity of risk
- Self-determination
- People experiencing disabilities have the choice of options that minimize reliance on others



Nothing About Us Without Us!!!



Impact on Lives of People Who Experience Disabilities

Center for Independent Living were created



Battles were fought and won for access

Americans with Disabilities Act.



Social Model----Medical Model

The Social Model of disability, draws on the idea that it is society that disables people, through designing everything to meet the needs of the majority of people who are not disabled. There is a recognition within the social model that there is a great deal that society can do to reduce, and ultimately remove, some of these disabling barriers, and that this task is the responsibility of society, rather than the disabled person.

The social model is more inclusive in approach. Pro-active thought is given to how disabled people can participate in activities on an equal footing with non-disabled people. Certain adjustments are made, even where this involves time or money, to ensure that disabled people are not excluded. The onus is on the organizer of the event or activity to make sure that their activity is accessible.

The Medical Model views disability as a 'problem' that belongs to the disabled individual. It is not seen as an issue to concern anyone other than the individual affected. The individual needs to be "fixed" or made "normal". People who experience a disability also need to meet the same standards of healing or therapy as a typical member of society.

This medical model approach is based on a belief that the difficulties associated with the disability should be borne wholly by the disabled person, and that the disabled person should make extra effort (perhaps in time and/or money) to ensure that they do not inconvenience anyone else.

Communicating with People Who Experience Disabilities

1. Always speak directly to the person. Not a companion or service provider.
2. Offer to shake hands just as you would anyone you meet.
3. Identify yourself when speaking to a person who is blind. And announce when you enter or leave a room.
4. Wait for a response & instruction when offering assistance. Don't be offend if they deny your offer.
5. Treat adults as adults

6. Do not hang or lean on a person's wheelchair or scooter.
7. Listen attentively and never pretend to understand
8. Speak to people suing wheelchair at eye level, especially if for an extended time.
9. Wave your hand or tap a person who is deaf on the shoulder
10. Relax! They may not know how to talk with you either

Communicating with People Who Experience Disabilities

Say This	Instead of This
Person with a disability	Cripple, disabled person, invalid, handicapped, victim
Disability	Handicap
Person who has _____.	Afflicted with, suffers from
Person who uses a wheelchair or crutches: a wheelchair user: walks with crutches	Confined/restricted to a wheelchair; wheelchair bound
Person who has a mental or developmental disability	Retarded, moron, imbecile, idiot, slow, stupid
Person with a cognitive disability	Mentally retarded
Person who has a disability, has a condition of (spina bifida, etc.) or person born (without legs), etc.	Defective, deformed
Person who had a spinal cord injury, polio, a stroke, etc. or a person who has multiple sclerosis, muscular dystrophy, arthritis, etc	Victim
Person who is deaf/hard of hearing	Deaf, deaf and dumb, deaf-mute, hearing-impaired
Person with Autism	Autistic
Person who has been disabled since birth/who has a congenital disability	Birth defect
Person who receives special education services	In special education
Accessible Parking	Handicap parking or disabled parking
Person of short stature	Dwarf or midget
Person with mental health condition	Emotionally disturbed or mentally ill
Person who communicates with eyes/devices/etc.	Non-verbal

Questions

