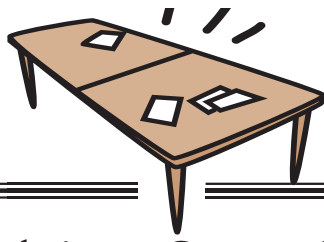


WHEN THE



IS TURNED

Revolutionary Common Sense
by Kathie Snow

As a special ed teacher for more than twenty years, Charmaine (my best friend), has always seen herself as a diligent, effective advocate for the students she taught and their parents. Her experiences have run the gamut, from teaching in horribly labeled self-contained classrooms to supporting students and teachers in inclusive general ed environments.

During IEP (Individualized Education Program) meetings, she felt she was on the “side” of the child and his parents, much to the chagrin of some of her coworkers and supervisors. She did what she could to move students into inclusive general ed classrooms, contrary to the wishes of other educators. Her bold and brave actions often led others to see her as a “rebel” or “not a team player.” Still, she persevered, believing she was a positive force and a strong advocate.

Then her third child was born with Down syndrome. When the nurses in the hospital brought her new baby to her, she recalls, there was great sadness in their eyes. Her friends at the time (most were special and general ed teachers) dutifully expressed, “I’m so sorry,” and other pitiful responses. Charmaine was astounded, sad, and angry that no one joined in celebrating the birth of her precious Dylan.

Then one day, a team of professionals arrived for Dylan’s first IFSP (Individualized Family Support Plan) meeting. As she listened to the negative pronouncements about her baby son, Charmaine was reduced to tears. (Many more “I” meetings

would follow, none of which were much better, in Charmaine’s opinion.)

After this first meeting, Charmaine dried her tears and thoughtfully analyzed the situation. Although she was an experienced professional in the developmental disabilities arena, the IFSP meeting and the actions of others ripped a hole in her heart. But the members of the IFSP team weren’t mean, cruel people—they were just doing their jobs! Reflecting on the number of IEP meetings she had attended over the years on the side of the child and parent, she felt remorse, recognizing that negative outcomes could arise even with all the “good” she tried to do at IEP meetings.

It was only when the table was turned—when she was sitting at a meeting as a parent instead of a teacher—that she saw both sides of the story. She spent some time thinking about how, as a special educator, she could have done things differently at all those IEP meetings, and she resolved to do things differently in the future.

My 86-year-old stepfather, Robby, is a retired military chaplain, who never really retired. For the last 40 years, he has served as a civilian minister and hospital chaplain. While spending countless hours visiting patients in medical settings, he frequently—and informally—“joined” the medical team, encouraging patients to follow the directives of the medical professionals.

About a year ago, Robby had a mild heart attack. After spending a few days in the hospital, he was transferred to a rehab center for “four to

2 - When the Table is Turned

six weeks of cardiac rehab therapy,” which consisted of physical (PT) and occupational (OT) therapies. When he and my mother told me about the inpatient rehab, I asked them to explore other options—like Robby going home and getting outpatient therapy. It seemed ridiculous to spend 24/7 in a rehab center when he was only going to be seen by therapists for an hour or two per day!

But my mom and stepdad were determined to follow the doctor’s orders. This is what “good patients” do, right? And after forty years of telling others to follow the doctor’s orders, as part of the “hospital team,” Robby wasn’t about to change his tune.

After two nights in the rehab center, Robby bolted. The reasons? Several. Occupational therapy activities included Robby playing cards to limber up his stiff hands; physical therapy included leg lifts; and both therapies were things he could do himself. Robby didn’t feel the need to stay immobile in a bed all day, just waiting for the therapists, when he could be doing all these things—like playing cards with my mom—at home! (Later, I learned from another cardio-rehab professional that the primary reason he was referred to inpatient, instead of outpatient, therapy was because he had “good insurance”—and that those *without* good insurance were almost always referred to outpatient rehab. That was a real eye-opener!)

Another reason for Robby’s escape involved his accommodations. His roommate was hooked up to a variety of beeping machines. The first night, one of the nurses turned down the volume of the machines so Robby could sleep. The

second night, a different nurse told Robby it was just “too bad” if he couldn’t sleep, that the nurses needed the volume up on the machines at all times. When Robby protested about the “damn noise,” Nurse Ratchit proclaimed she would “turn him in” for using profanity.

After this learning experience, no longer does Robby routinely encourage patients to robotically “follow orders.” Instead, he suggests they ask questions, be thoughtful, and take more responsibility for their own care and decision-making. Being on “the other side” has given him a different perspective.

You or someone you know may have been in situations where the table has turned. The experience probably (hopefully?) resulted in a change in attitudes, actions, or behaviors.

Valuable lessons in empathy can be learned when we experience situations first-hand. And it’s important to embrace these lessons and see how they may apply to others in our sphere of influence. Even if we don’t have the opportunity of learning through personal experience, however, we can still make a great effort to learn what another’s life is like. If we care enough, if we take the time, if we’re courageous enough (to face the truth), and if we make the choice to ask others to tell us about their lives and experiences, as well as their hopes, dreams, interests, and more, we *can* learn—and in the process, we’ll make the world a better place.

Today, in your imagination, change places with a person in your life who has a disability. Be thoughtful and be honest—be really, really honest. Then make some changes: in your thoughts, words, and actions—and change a life in the process.

©2004-06 Kathie Snow. Permission is granted for non-commercial use of this article: you may photocopy to share with others as a handout. Please tell me how/when you use it: kathie@disabilityisnatural.com. Do not violate copyright laws: *request permission before reprinting in newsletters, web sites, list serves, etc.* To learn more new ways of thinking, to sign up for the free Disability is Natural E-Newsletter, to see products that promote positive images, or to learn about Kathie’s *Disability is Natural* book and video, visit:

WWW.DISABILITYISNATURAL.COM