



1. Understanding Inclusive Education

1.3 Models of disability, adjustment, inclusion and circles of support

Introduction

Models of disability provide a framework for understanding the way in which people with impairments experience disability. They also provide a reference for society as laws, regulations and structures are developed that impact on the lives of disabled people. This section looks at some models of disability, what inclusive education means and how circles of support can facilitate inclusion.

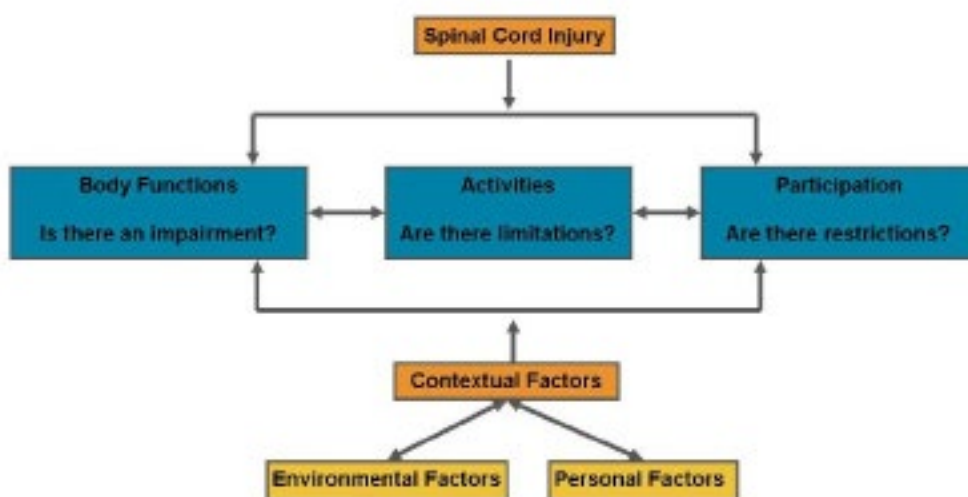
Models of disability

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Two main models which are frequently discussed are the 'medical model of disability' and the 'social model of disability'. The **medical model** views disability as a feature of the person, directly caused by disease, trauma or health condition. It calls for medical treatment or intervention, to 'correct' the problem with the individual. The **social model** sees disability as a socially created problem, not an attribute of the individual. It is society which 'disables' people through being designed in an inaccessible way and through disabling attitudes.

There is also the **bio-psychosocial model** of disability, which sees disability as an interaction between a person's health condition and the environment they live in. It advocates that both the medical and social models are appropriate, but neither is sufficient on its own to explain the complex nature of one's health. The bio-psychosocial model is useful to understand the support that spinal cord injured young people, their families and schools may need to ensure to full inclusion in mainstream education.

Model of bio-psychosocial model:



(Amended from the World Health Organization's The International Classification of Functioning, Disability and Health)

This **bio-psychosocial** model shows the complex and dynamic relationship between a number of inter-related factors. In this model a person's ability to function is viewed as the outcome of the interactions between the medical factor (spinal cord injury) and contextual factors.

The contextual factors include external environmental factors such as social attitude and buildings, and internal personal factors, which include coping styles, social background, education and other factors that influence how disability is experienced by the individual.

The diagram identifies the three levels of human functioning:

- 1 Body Function
- 2 Activities
- 3 Participation

Within this model disability occurs when one or more of these levels of function are not working to their full potential; are there impairments in body function such as a significant loss of movement, are there limitations a person may have in doing activities, are there restrictions that a person may experience in participating or being included in life situations.

Back Up feels that understanding how these levels and the contextual and medical factors are connected, and how they impact on each other is crucial to effectively supporting people with a spinal cord injury to realise their full potential.

Model of adjustment post spinal cord injury

Personal and social factors will affect how a person initially perceives their situation as a person with a new spinal cord injury. Different people, at different times, may perceive their situation as unmanageable, or as a manageable challenge.

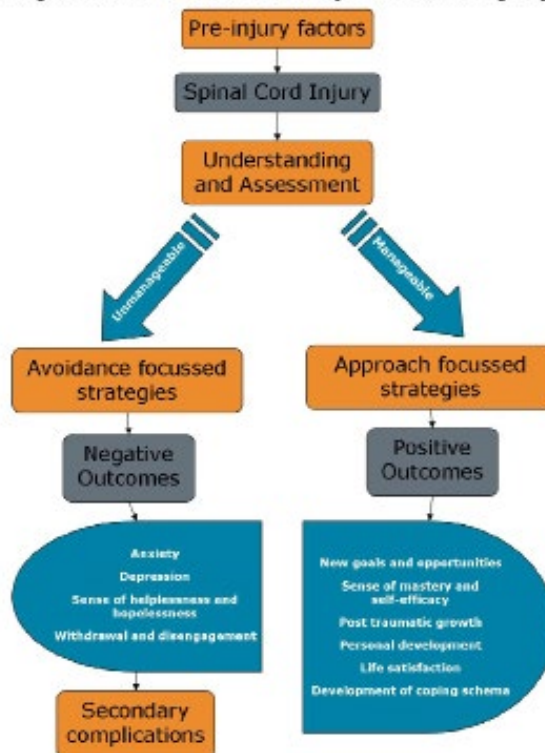
The **scientific evidence** shows that those that are able to perceive their situation as a manageable challenge will employ certain kinds of approached focussed coping strategies such as using support available, and taking on challenges, building up their confidence and skills and adjusting emotionally to their situation, with long-term positive outcomes in life.

Those that see their situation as unmanageable will tend to use coping strategies aimed at avoiding the situation, such as disengagement from rehabilitation, withdrawal, alcohol and drug use. These behaviours, on a long-term basis often lead to depression and anxiety and self-neglect resulting in hospitalisation for pressure sores and urinary tract infections.

Approach focussed strategies include:

- Using emotional and practical support (friends, family, school)
- Behavioural activation – being included at school, having meaningful activities, accessing leisure services
- Acceptance – being able to talk about the situation, accept the reality of the situation

Adjustment Model Post Spinal Cord Injury



(adapted from Duff and Kennedy, 2003, in Kennedy and Ulewellyn, 2003)

- Active problem solving and goal setting
- Positive reinterpretation – believing that something good can come out of the situation

This adjustment model helps to show how the schools and families inclusion service links to long-term positive life outcomes for children and young people with a spinal cord injury. Supporting schools to provide emotional and practical support, ensuring that the child or young person is fully included in all aspects of school life, and that the school environment encourages them to talk about their situation openly, will lead to more positive long term outcomes for children and young people with a spinal cord injury.

“ **Inclusive education means, to me as a parent of a child with a spinal cord injury, awareness. It’s staff knowing the child’s needs. It’s not just about having ramps and things like that. It’s a triangle between the parents, school and the student. And if you haven’t got that communication, no matter what facilities are in place you won’t have the inclusion.**

Janet, mum of son age 16

“ **Inclusive education is a social justice issue because it creates a society that values all equally – not only does it benefit disabled students, but all students, because they learn the strength of diversity and equality, lose their fear of difference, and develop empathy for others. It is as much about recognising our similarities as it is valuing and respecting our differences. Feeling part of our families and our communities from the beginning of our lives increases our sense of citizenship.**

Tara Flood CEO, Alliance for Inclusive Education

Inclusive education enables all students to fully participate in any mainstream early years provision, school, college or university. Inclusive education provision has training and resources aimed at fostering every student's equality and participation in all aspects of the life of the learning community.

Inclusive education aims to equip all people with the skills needed to build inclusive communities.

Inclusive education is based on seven principles:

- Diversity enriches and strengthens all communities;
- All learner’s different learning styles and achievements are equally valued, respected and celebrated by society;
- All learners to be enabled to fulfill their potential by taking into account individual requirements and needs;
- Support to be guaranteed and fully resourced across the whole learning experience;
- All learners need friendship and support from people of their own age.
- All children and young people to be educated together as equals in their local communities;
- Inclusive Education is incompatible with segregated provision both within and outside mainstream education;

Education not Segregation

Taken from the [Alliance for Inclusive Education](#) website.

“ When I went back to school back into physical education there was a few times that the sport they chose to play wasn't suitable for a wheelchair user and I decided that I didn't want to sit and just watch them playing sports for an hour. So I went up to my teacher and I said to him that obviously I can't play football but can I referee the match? I quite enjoyed it, even though I wasn't taking part in the full game.

Dean, 15

The seven principles of inclusive education clearly link with the approach focussed strategies outlined in the adjustment model, which are proven lead to positive outcomes for people with a spinal cord injury.

Circles of support model

A 'circle' is a group of people who meet together informally to support a person who needs extra help and guidance to achieve their full potential. This circle does not need to be additional to any multi-disciplinary meetings that might already take place. It encourages the full inclusion of the child or young person in this process, and the continued communication between professionals, family members and the young person outside of these meetings. For more information on formal structures of support see section 2.2 Knowing who to involve.

“ We have been made aware of how many different people need to be on the team to provide the support. If everyone can tackle something within their area of expertise, and we are all given a broadened awareness, then the support given is much better.

SENCO, Gloucester

If formal meetings come to an end because all actions have been met, the circles model encourages people to continue having those meetings in the form of a more informal circle of support. The aim of the circle is to ensure that the child of young person continues to be at the centre of any decisions that affect them, and that all the many school staff and other professionals outside the school environment, along with family members are communicating effectively for the benefit of the child or young person.

“ Back Up was really helpful in making suggestions for other organisations that could help not only us with our work in school, but also his parents, to ensure that they are fully supported.

School of boy aged 5

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Ben had a very good relationship with the matron and he was able to go to her at anytime. I used to call her and she would call me.

Janet, mum of son 16

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I now work in a far more multi-agency way, I'm in contact with other professionals, it's great to speak to them and meet them halfway.

SENCO, Gloucester

Everyone in the circle will work together:

- 1** Parents seek and receive help from school and community professionals
- 2** School professionals provide individualised care and guidance while keeping parents

fully informed

3 Community, school and health professionals are available to listen, refer and collaborate

4 Agencies and schools develop a network which is able to deal with any issues that might arise

Connections are in place for family and professionals to call upon for advice in order to support the child or young person to achieve their goals. The circles model does not just focus on support for the child or young person but allows for professionals to create their own circle, for them to have people that they can call upon for advice in order to best support the child.

A circle properly facilitated is empowering to all of the individuals involved, and works to ensure that the child or young person is included in school in the way that they want to be.

Resources to link to or include

- [ETTAD](#) website: more detail about the medical and social models of disability
- [ALLFIE](#): website on inclusive education