Ability Awareness: Emotional Well-Being for People with Disabilities
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Presentation Outline

- Outcomes
- Overview of the NAC
- Person First Language
- Tips to support
- Behavior as communication
- Population specific info
- Essential Eligibility Criteria
- Wrap up
Presentation Outcomes

1. Ability to explain what person First language is and why it is important.

2. Ability to list at least one learning tip/technique for working with different populations.

3. Start the groundwork for serving people with disabilities.
HISTORICAL TIMELINE

1979
After hosting adaptive river trips with Ken Sleight Expeditions, Martha Ham founds Splore in Moab, Utah.

1985
Founded as Park City Handicapped Sports Association by Meeche White and Pete Badewitz. They first taught ski lessons through a grant from the Disabled American Veterans of Utah.
26 acres of land were donated anonymously at Quinn’s Junction.

Bronfman Family Recreation Center & Ranch was dedicated as the headquarters of the National Ability Center.

The NAC equestrian program received Premier Accreditation from the Professional Association of Therapeutic Horsemanship (P.A.T.H.).
In January 2017, Splore joined the National Ability Center. Through Splore adventure programs, and now provides adaptive adventures including river rafting, snowshoeing, climbing, Nordic skiing throughout Northern and Southern Utah’s mountains ranges and waterways.

2016

The NAC launches the quiet phase of a capital campaign with a goal to develop the ranch location and build a new mountain center with a goal to serve more individuals with disabilities.
Mission

To empower individuals of all abilities by building confidence, self-esteem and lifetime skills through sports, recreation and educational programs.
We share a collective vision to inspire individual achievement and create a global impact for people of all abilities.
YEAR ROUND PROGRAMS
AQUATICS, CAMPS, CLIMBING WALL, EQUESTRIAN

SUMMER PROGRAMS
ARCHERY, CHALLENGE COURSE, CYCLING, MOUNTAIN BIKING, OUTDOOR CLIMBING, PADDLE SPORTS, WATER SPORTS, WHITEWATER RAFTING, HIKING, CAMPING

WINTER PROGRAMS
ALPINE SKIING, BIATHLON, NORDIC SKIING, SNOWBOARDING, SNOWSHOE, FAT TIRE BIKING
What do you think that means?

Person First Language

What do you think that means?
Person First Language

1. Speak of the person first, then the disability.
2. Emphasize abilities, not limitations.
3. Do not label people as part of a disability group – don’t say “the disabled”; say “people with disabilities”.
4. Don’t give excessive praise or attention to a person with a disability; don’t patronize.
5. Choice and independence are important; avoid speaking for someone.
Person First Language

Speak of the person first, then the disability
Emphasize abilities, not limitations.
Do not label people as part of a disability group – don’t say “the disabled”; say “people with disabilities”.
Don’t give excessive praise or attention to a person with a disability; don’t patronize.
I'm not your inspiration, thank you very much

Stella Young
Choice and independence are important; avoid speaking for someone.
Identity First Language

• The disability is mentioned first (example, “Deaf woman” or “autistic boy.”)

• Enables groups and the individuals within them to "claim" their disabilities with pride (example: The Deaf Community)

• When in doubt, ask; If you can’t ask, use person first.
1. Speak directly
2. Shake hands
3. Identify yourself and others
4. Wait until offer for help is accepted or asked for
5. Do not patronize
6. Respect personal space and belongings
7. Listen carefully. Keep things simple. Clarify understanding
8. Wave to get a person’s attention. Keep your mouth clear and visible.
Key Concepts to Support People

• Assumption of competence
• Define clear expectations
• Build People Up
The Purpose of Behavior

• A way of communicating hopes, dreams, fears, anxieties, preferences, and priorities
• A way of meeting needs
• An attempt to cope with the demands of others
• A way of avoiding people, places or tasks
• Behavior IS communication
What may influence behavior?

• Environment
  • Noise
  • Visual stimulation
• Events prior to arrival or past experiences
• Needs and wants that are met or unmet
• Relationship with staff and other participants
• Level of stress
What may influence behavior?

**Stress**

Mandt System ®

The more stress you feel – the following increase:

• Adrenaline
• Cortical
• Heart rate
• Breathing
• Muscles tighten

The more stress you feel – the following decrease:

• Understanding and Reasoning
• Self-control
• Decision-Making
• Problem-Solving
Key Points to Consider

• Treat people as people
• Treat each person with dignity and respect
• Assume Competence
• Build people up – pay attention to effort
  • “Where attention goes, behavior grows”
• Look behind the behavior – what is it communicating?
• Affirm your feelings. Choose your behavior.
  • This takes practice!
• YOU have the power to support people’s future – don’t punish their past
Activity Time!

You will need:
- A mirror
- A pen
- A sheet of paper
Common symptoms of Autism may Include challenges with:

- Social skills
- Repetitive behaviors
- Speech and nonverbal communication
- Unique strengths and differences
- A Spectrum

Autism Speaks

Other diagnosis which often co-occur with ASD

- Sensory processing disorder
- ADHD
- Anxiety
- Dietary sensitivities
PTSD used to be considered an anxiety disorder but is now considered a neurological disorder. PTSD can occur after extreme emotional trauma (A demographic we could all join at some point!)

**PTSD does not present the same for everyone, but there are three main types of symptoms:**

1. **Re-experiencing the traumatic event**
   - Flashbacks, nightmares
   - Intense physical reactions to reminders of the event

2. **Avoiding reminders of the trauma**
   - Avoiding activities
   - Inability to remember important aspects of the trauma

3. **Increased anxiety and emotional arousal**
   - Difficulty falling/staying asleep
   - Irritability
Spinal cord injuries that involve the bruising, twisting, or severing of the spinal cord. Can be **complete** or **incomplete** interruption of nerve impulses up and down the cord.

**Levels of SCI**
- Cervical (Neck)  C1-C8
- Thoracic (Chest) T1-T12
- Lumbar (Low back)L1-L5
- Sacral (Tail bone) S1-S5

The “level” of a SCI is determined by the nerves injured, not the vertebrae that were injured.

**Keep in mind:**
- Be aware of catheters and pressure sores
- Beware of Autonomic Dysreflexia
- Body temperature
- Some may have a fused spine

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Congenital disability; occurs when the backbone doesn’t form completely during pregnancy.

**Three forms of Spina Bifida**
- Spina Bifida Occulta
- Meningocele
- Myelomeningocele

**Keep in mind:**
- People with SB are allergic to latex
- Use extra caution when transferring for meningeal sac
- Pressure sores, scrapes, or extreme temps.
- Shunts
- Variety of physical abilities
- May have increased upper body strength
Disorders in which the brain is damaged through organic or inorganic causes.

Possible deficits faced with a TBI

- Motor
- Perceptual
- Speech and language
- Personality changes and emotional limitations
- Regulatory disturbances

Teaching Tips

- Be aware of fatigue
- Repetition – memory loss
- Use simple directions
Can you support people with disabilities in your program?

- Staff training
- Medical information and screening
- Facilities and equipment
- Adaptability
- Caretaker role
- Grants
Essential Eligibility Criteria (EEC)

- Essential functional thresholds for anyone to safely participate in a program, service or activity

- Applied to ALL potential participants, volunteers and staff to avoid subjectivity and stereotyping

- Must be documented/posted/published for staff and potential participants to make objective decisions to participate.

- If an individual does not meet EEC, then risk management decision is objectively spelled out and documented.
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- Publishing criteria protects the organization from discrimination claims.

- It’s about equalizing opportunity, not standardizing outcomes

- Excludes participation based upon the unique environmental factors and staff & participant safety

- Should be kept separate from prerequisites and goals; EEC’s are functional thresholds

- Cannot be waived; age is not an EEC

- Do not create EEC’s that are subjective; i.e. must have the desire to have fun, etc.
Examples of EEC

- Must be able to wear properly fitting safety equipment and meet industry standard weight requirements.

- Must be able to manage personal care independently or with assistance of a parent, guardian or caregiver, which includes but is not limited to toileting, dressing, eating, and drinking.
Takeaways

• Let others define who they are and what is challenging to them

• There is dignity in risk for everyone

• Don’t be afraid to ask questions; communication is key

• Support

• Don’t worry so much!
Thank You!
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