

SPHSC 308
Winter 2010

Individual with Disabilities:
Consideration of Context –
Situational, Social, Cultural

Context and Disabilities

- Lecture Organization
 - WHO and disablement
 - Views of disabilities
 - insider's vs. outsider's perspective
 - Role of situational, social and cultural context
 - Assessment
 - Intervention

Global statistics

- **650,000,000** people live with disabilities
(roughly 10% of the population)
- **20%** have access to jobs, services, education
- **80% *do not*** have access to jobs, services, education
- **90%** of children with disabilities do not attend school.

(source: World Health Organization)

World Health Organization (WHO)

- World Health Organization
 - Agency of the UN (1948)
 - “the attainment by all people of the highest possible level of health”
 - Monitor, prevent and combat disease, and promote the general health of people of the world

The WHO Family of International Classifications

International Classification of Diseases (ICD)

International Classification of Functioning,
Disability and Health (ICF)

International Classification of Health
Interventions (ICHI)

World Health Organization

International Classification of Functioning



**ICF is the
WHO's
framework for
health and
disability**

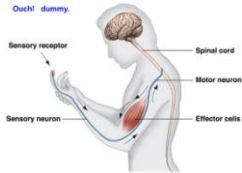
Disablement...

- is a universal human experience
- is considered within social and environmental contexts (not just medical or biological dysfunction)
- is an umbrella term

www.who.int/classification/icf/en

ICF Components

Body Functions & Structures



Functions

Structures

Source: <http://www3.who.int/icf/beginners/bg.pdf>

Body Functions and Structures

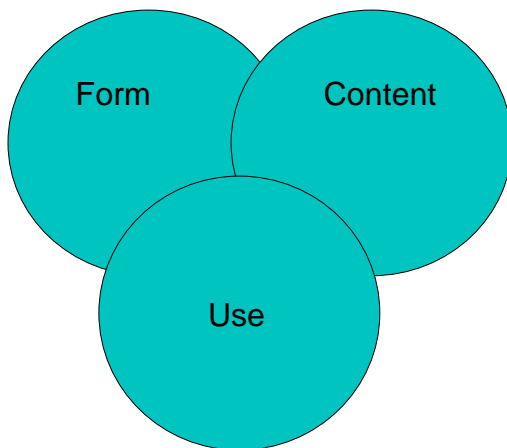
Mental functions	Structures of the nervous system
Sensory functions and pain	The eye, ear and related structures
Voice and speech functions	Structures involved in voice and speech
Functions of the cardiovascular, hematological, immunological and respiratory systems	Structures of the cardiovascular, immunological and respiratory systems
Functions of the digestive, metabolic and endocrine systems	Structures related to the digestive, metabolic and endocrine systems
Genitourinary and reproductive functions	Structures related to the genitourinary and reproductive systems
Neuromusculoskeletal and movement-related functions	Structures related to movement
Functions of the skin and related structures	Skin and related structures

Source: <http://www3.who.int/icf/beginners/bg.pdf>

How would you use
ICF Body Function and Structures
to describe Lia Lee's impairment?

Communication Disorders

Receptive and Expressive



Diagnosis/Etiology
Impairment:
Structures
Functions

Structures and Functions

- Influenced by micro, meso, exosystem
 - Situational
 - Social-Interpersonal Context
- Influenced by macrosystem
 - Cultural perspective

ICF Components

Body Functions & Structures



Functions

Structures

Activities & Participation



Capacity

Performance

Source: <http://www3.who.int/icf/beginners/bg.pdf>

Activities and Participation

- 1 Learning & Applying Knowledge
- 2 General Tasks and Demands
- 3 Communication
- 4 Movement
- 5 Self Care
- 6 Domestic Life Areas
- 7 Interpersonal Interactions
- 8 Major Life Areas
- 9 Community, Social & Civic Life

Source: <http://www3.who.int/inf/beginners/bg.pdf>

Activities and Participation

- Activity: Conversation (in person, on phone)
 - Participation: visiting with a friend, meeting new people
- Activity: Requesting
 - Participation: Ordering at a restaurant, making needs known to family/caregivers
- Activity: Following instructions
 - Participation: Able to be employed, live independently

Consider Lia Lee's activity limitations
and participation restrictions...

Activities and Participation

- Influenced by micro, meso, exosystem
 - Situation
 - Social-Interpersonal Context
- Influenced by macrosystem
 - Cultural perspective

ICF Components

Body Functions & Structures



Functions

Structures

Activities & Participation



Capacity

Performance

Contextual Factors (personal & environmental)



Barriers

Facilitators

Source: <http://www3.who.int/icf/beginners/bg.pdf>

Personal Factors

Internal factors/often not changeable

1. Age
2. Gender
3. Coping
4. Social Background
5. Health Condition
6. Education
7. Profession
8. Character - style

Source: <http://www3.who.int/icf/beginners/bg.pdf>

Environmental Factors

External factors

1. Products and technology
2. Natural environment and human-made changes to the environment – barriers and facilitators
3. Support and relationships
4. Attitudes
5. Services, systems and policies

Source: <http://www3.who.int/ict/beginners/bg.pdf>

Disablement

Insider's perspective

- What's it like to live with a disability?
 - Impact on life
- What does adaptation consist of?
 - Developmental
 - Acquired
- What is "ultimate" adjustment?

Disablement

Outsider's perspective:

- different “outsiders”
 - family, friends, professionals, organizations, society
- what do these different “outsiders” think of the impairment, person who is living with the impairment, how their own lives are impacted
 - http://www.youtube.com/watch?v=L2_BVRipAaM

Macrosystem: National level

- World Health Organization (WHO)
- American with Disabilities Act
 - Assessment of perceived disability must include society, community, family
- Public Laws 99-142; 99-457
 - “Education for All”
 - nondiscriminatory testing
 - testing done in native language
 - data from various sources
- American Speech, Language, Hearing Association (ASHA)

Meso/Exosystem: State level/Local level

- State and county governments
- Local public health care policies
- School District and home school policies
- Funding agencies
- Professionals (Medicine, Education, Social Workers, SLP, Aud, PT, OT, etc.)

Micro System

- Family understanding of disability
- degree of acceptability
- perceived cause of disability

What were some **personal and environmental factors** that impacted Lia's Activity Limitations and Participation Restrictions?

Assessment and Intervention: Contextual Considerations

Assessment and intervention are more successful when context is considered (situational, interpersonal, cultural) and influences are recognized

- Observation and Interview Crucial

Influencing Variables Situational Context

Consider:

- Setting
- Activity
- Materials
- Individual's present

Influencing Variables Systems and Culture

- Generational membership
- Length of residence--acculturation
- Socioeconomic status
- Educational level
- Urban or rural background
- Age and gender
- Language spoken

Considerations in Assessment

- Form & Content
 - bilingualism
 - English proficiency
 - dialects

Considerations in Assessment

- Use
 - eye contact
 - nonverbal communication
 - conversational rules
 - turn taking
 - topic initiation
 - resolving communication breakdowns/conflicts
 - amount of talking
 - rules and expectations between speakers and across contexts

Considerations in Treatment

- Attitude about change
 - can there be change
- Attitude about treatment
 - who should be involved
 - who is responsible
 - how shall it be delivered (when, where, how, by whom, with whom)

To be a culturally sensitive professional you need to know your assumptions.

“Assumptions are the things you don’t know you’re making...the shock is that it had never occurred to you that there was any other way of doing it. In fact, you had never even thought about it at all, and suddenly here it is different. The ground slips.”

Some assumptions you may have

- Time
- Beginning an interaction in regards to time
- Formality vs. Informality
- Directness

Some assumptions you may have

- Gender
- Age
- Written documentation
- Intervention and independence

Some assumptions you may have

- Family participation
- Control or destiny
- Language in the home

Cross Cultural Effectiveness: Guidelines

Consider yourself and your client: (From I. Stockman, J. Boulton, & G. Robinson (2004). Multicultural Issues in Academic and Clinical Education. ASHA Leader)

- History
- Beliefs & Values
- Customs/Cultural Practices
- Material Culture – aesthetics, artifacts, tools
- Learning Style
- Language
- Social Interaction Style
- Social Systems/Organizations

Cross Cultural Effectiveness: Guidelines

Consider yourself and your client when you complete the following:

- Referrals
- Scheduling
- Gathering Information- Background/Demographics
- Assessing – Client complaint, tests/procedures
- Treating – client objectives, preferences, evidence from the discipline
- Recommending – consultation, home program, etc.
- Discharging

Cross Cultural Effectiveness: Guidelines

- You may be asked to
 - learn about family practices related to health, disablement, child rearing
 - explain your role
 - interpret mainstream culture
 - design an intervention program to meet the individual needs of the client and the family
 - consider and handle cultural practices that maybe be detrimental or even harmful (to the child or dependent)

Cross Cultural Effectiveness: Guidelines

- You may need to
 - prepare family for meetings--formality, topic, participants
 - encourage families to bring whomever they wish to sessions
 - encourage input from family in a way that is comfortable
 - encourage goals and objectives that address the family concerns
 - design treatment strategies that are compatible with families beliefs/values
 - use a cultural mediator/interpreter

Cross Cultural Effectiveness: Gathering Information

- Observation (ETHNOGRAPHY):
 - Determine if this is appropriate
 - Watch family interact--waiting room

Cross Cultural Effectiveness: Gathering Information

- Interview (PHENOMENOLOGY): Ask open-ended questions (e.g., Would you describe a typical playtime for your child, or a typical day at home for your spouse) to determine family's:
 - child rearing practices
 - developmental and other expectations
 - decision making
 - views on illness and disability
 - willingness to accept outside help

Cross Cultural Effectiveness: Gathering Information

- Utilize cultural mediators/interpreters when appropriate:

Criteria for interpreter:

- demonstrates good bilingual skills
- demonstrates professional attitude
- establishes good rapport
- maintains confidentiality

Cross Cultural Effectiveness: Gathering Information

Using an interpreter:

- meet with interpreter before to prepare-- vocabulary etc.
- seat interpreter next to client, facing you, look at client
- introduce everyone and make sure the purpose of the meeting is understood
- speak in short sentences and allow time for translation
- encourage direct translation of client/your words

Cross Cultural Effectiveness: Summary

- Be willing to recognize and discuss your biases and assumptions
- Be open to, appreciate and respect family practices as valid and important even if different from your own
 - doesn't mean you need to become part of other's culture
 - doesn't mean you need to know everything about another culture
 - there are many ways to view the world

Cross Cultural Effectiveness: Summary

- **Avoid stereotyping**
- Remember:
 - respect client as individual
 - recognize that cultural influences change as the situation changes
 - establish a collaborative relationship
 - be flexible and considerate

Application-Scenarios

- What is the major issue?
- What additional information do you need?
- Interview: What questions might you ask client/family? How would you phrase them? What about follow-up questions?
- Observation: What would you like to learn from observation? How would you conduct it?