

# I'm an individual...

Children and young people with disabilities

## Real Kids, Real Carers

A continuing education  
resource for foster carers

Written by Paula Hayden and  
Louise Mulroney



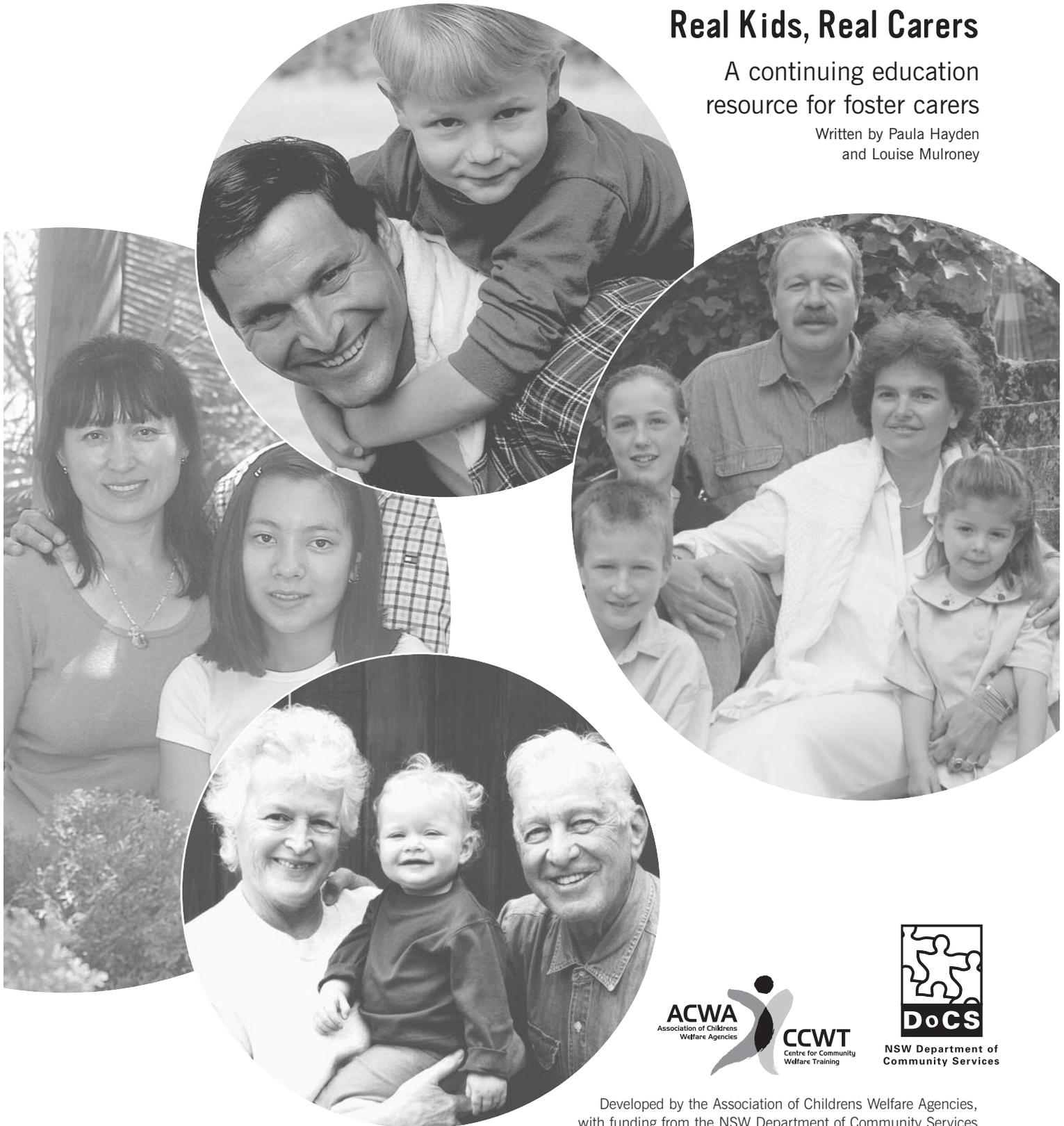
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**ACWA**  
Association of Childrens  
Welfare Agencies



**CCWT**  
Centre for Community  
Welfare Training



**NSW Department of  
Community Services**

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## Additional copies

Additional copies of this booklet can be downloaded from  
[www.acwa.asn.au/realkidsrealcarers/](http://www.acwa.asn.au/realkidsrealcarers/)

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# About Real Kids, Real Carers

This booklet is part of a continuing education resource for foster carers called *Real Kids, Real Carers*.

*Real Kids, Real Carers* contains 6 separate booklets covering topics of importance to foster carers.

## The titles in the series

- ★ Independence and connections: caring for adolescents
- ★ I'm an individual: children and young people with disabilities
- ★ Participation: creating opportunities for children and young people to contribute to decision-making
- ★ Reality fostering: the impact of fostering on carers and their families
- ★ Whose job is this? team work in foster care
- ★ Whose problem is this? understanding and responding to challenging and difficult behaviour

Full copies of all titles in the series can be downloaded from [www.acwa.asn.au/realkidsrealcarers/](http://www.acwa.asn.au/realkidsrealcarers/)

## Using these booklets

Each booklet sets out a two-hour education session. Experience has shown that foster carers are more able to access training that can be completed in a half day or evening.

The learning opportunities will be enhanced if sessions

- > involve an experienced foster carer as part of the training team
- > include agency workers as participants.

These sessions provide an introduction to the topic under discussion, though follow-up sessions may be required to explore the topic in depth.

These sessions are designed for all carers, whether very experienced or currently in their first placement. Children of foster carers, particularly those who are older teenagers and young adults, will also benefit from participating in these education sessions.

## Training resources

These booklets provide detailed guides to all activities, including handout material to be photocopied for participants. Handout material can be found at the back of each booklet.



The booklets include “scripts” for trainers which are indicated by the use of the talking head icon.

Such scripts are not meant to be prescriptive, but provide input material that trainers can use and present in their own style.

# Session information

## Learning outcomes

At the end of the session, participants will be able to

- > identify stereotypes and realities in relation to children and young people with disabilities
- > describe strategies which maximise participation in decision making by children and young people with disabilities
- > describe strategies to assist children and young people with disabilities maintain contact with their birth families.

## Material required in session

- > Whiteboard or butchers paper
- > A workbook for each participant, made up of Handouts 1-9
- > Evaluation form for each participant (see the example at the end of this booklet)
- > Resources for carers to borrow from your agency relevant to the topic (eg posters, booklets, videos)

## Length of session

- > 2 hours minimum

*Training should include opportunities for carers to informally exchange information and build their networks. Ideally training will include additional time allocated for a meal or coffee breaks.*

# Session Outline

## 1. Introduction (25 minutes)

### Activity

Go around the group and have each person say

- > his/her name
- > one thing they hope to get out of this session.

**Briefly introduce yourself.**

**Explain any necessary housekeeping details** eg location of toilets, length of session, need to turn off mobile phones, arrangements for refreshments etc.

**Explain group rules**

**Highlight the importance of**

- > maintaining confidentiality ie not discussing personal details about any child, young person or adult in a way that means that other people in the group could identify them
- > respecting other people in the group by listening to others opinions, even if not the same as your own.

**Explain purpose of session**

**Distribute workbooks.**

**Go through Handout 1.** Check with participants that the learning outcomes on the top of Handout 1 fit their expectations of the session.

### Activity

**Brainstorm:** What comes to mind when you hear the term “children and young people with disabilities”?

**Write up responses** on the board.

*(Responses could include listing of a range of disabilities.)*

**Read Handout 2** with participants.

**Ask for any questions or comments** on the material on Handout 2.

## Question to discuss

- ❖ What are some of the challenges and rewards of working with children and young people with disabilities?

**Write up feedback** under two headings: “rewards” and “challenges”.

## Input



“When working with children and young people with disabilities we can easily become focussed on the disability and lose sight of the person.

A key principle if we are to work effectively with children and young people with disabilities is to remember that they are people first, with many similar physical, sexual, emotional and social needs to other children and young people.

The way their needs are met may be different from other children and young people and they may need more support and assistance to have their needs met.

For the purpose of this training we have grouped children and young people together and there are some broad principles, which apply to both groups. However young people with disabilities have particular needs and rights in relation to identity, participation and opportunities to express social and sexual aspects of their personality.

Children and young people with disabilities have been shown to be more at risk of abuse and are over represented in the out-of-home care system. (A survey done on one large out-of-home care provider in NSW in 2002 indicated 40% of all children in their care had a disability.)

Stereotypes, misconceptions and myths about children and young people with disabilities abound and influence the way we see and sometimes label people in this vulnerable group.

Identifying stereotypes and myths is the first step towards seeing children and young people with disabilities as individuals.”

## 2. Stereotypes and realities about disability (30 minutes)

### Exploring stereotypes

**Read through Handout 3** “Stereotype or reality?”

**Ask participants to respond** to each point. Ensure the following issues are covered.

*Children with Down Syndrome are always happy and easy going.*

**False.** Children with Down Syndrome are not all the same. They are individuals with a range of likes and dislikes. Outward appearance may make them look happy. This statement is a stereotype.

*The best way to find out what a young person with a disability wants is to ask their carer.*

**False.** Everyone has a right to be treated with respect and to participate in decision-making. Communicate with the child or young person first about they want. If you are having difficulty understanding them, ask if it's okay to ask their carer.

*Children and young people with disabilities prefer to socialise only with children or young people with disabilities.*

**False.** Children and young people with disabilities are like other children and young people. They may enjoy socialising with a wide range of people, including those with and those without disabilities.

*Young people with intellectual or physical disabilities are social and sexual beings who need to be able to express all aspect of their personality with a range of people of their choosing.*

**True.** Young people with disabilities are social and sexual beings who need opportunities to be able to express those aspects of their life.

*Participating in decision making for children with intellectual disabilities creates additional stress for them and their carers and is not as important as for other children and young people in care.*

**False.** Children and young people with disabilities are people first with rights, which need to be protected and promoted. Opportunities to participate in decision-making are empowering and a key step on the road to maximising potential.

When children and young people are not given opportunities to participate it reinforces dependency.

*Contact with their family of origin is not as necessary for children and young people who are intellectually or physically disabled.*

**False.** Children and young people with disabilities have the same rights and needs in relation to their identity as other children and young people. Frequent contact may be particularly important to assist children and young people minimise feelings of rejection related to their disability.

**Read through Handout 4** “Rights of children and young people in care”.

### Question for discussion

- ❖ Are any of the rights on Handout 4 not applicable to children or young people with disabilities?

### Highlight NSW standards



“Some relevant NSW documents which relate to the care of children and young people with disabilities include the *NSW Disability Standards* and the *Children and Young Persons (Care and Protection) Act*. Extracts from those documents are set out on Handout 5.”

### Activity

**Divide participants into groups of 3**, and ask them to provide a specific example of how each of the points on Handout 5 could be applied in the day-to-day care of a child or young person.

## 3. Maximising participation and potential (35 minutes)

### Focus on child or young person, not their disability



“Every child and or young person should be given opportunities to maximise their potential. The reality for children and young people with disabilities is that they often receive less favourable treatment. This is because of the discrimination and prejudice they encounter.

The focus is often on the disability as opposed to the individual and the ability of the child or young person.

Carers have a key role in helping to diminish the impact of discrimination on children and young people in care and in creating opportunities for children and young people to grow into their full potential.”

### Activity

**Divide participants into groups of 3** and ask them to go through the questions on Handout 6 “Vanessa’s story”.

**Get feedback** from the group.

### Question for discussion

- ❖ What might happen if children and young people are denied opportunities to participate and maximise their potential?

**Note responses on board** (*eg increased isolation, increased frustration / depression, denied opportunities to grow, increases dependence*)

## Building self esteem



“Building self-esteem and helping children and young people feel good about themselves is crucial for children and young people with disabilities. They are frequently exposed to negative patronising images of children and young people with disabilities.”

**Brainstorm** some ways carers can promote a positive self-image in children and young people with disabilities.

*Responses could include a focus on the positive abilities and not on the disability, treating children and young people in age / development appropriate way, providing choices.*

## 4. Contact – my family’s also important to me (25 minutes)

### Explain the importance of contact



“Children and young people with disabilities are more at risk of losing connection with their family of origin than other children and young people in care.

Sometimes this is because workers and carers, faced with meeting the complex needs of children and young people with disabilities, put issues in relation to contact in second place to meeting all the other needs.

However, children and young people with disabilities should not be denied opportunities to develop their sense of identity.

It is critical that the individual needs of children and young people in relation to contact be determined and a range of strategies be put in place to meet those individual needs. This may require that some children and young people with disabilities have more contact and others less.

As in all contact arrangements, the focus should be on the needs of the child or young person.”

### Activity

**Divide group into 3’s** and ask them to read through Handout 7 and answer the questions on that page.

**Get feedback** from the small groups.

## 5. Conclusion (10 minutes)

### Activity

**Ask participants to identify** something they will do differently as a result of this training session.

**Invite participants to complete** the evaluation sheet.  
*(See the example at the end of this booklet)*

# Learning Outcomes of Session

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At the end of the session, participants will be able to

- > identify stereotypes and realities in relation to children and young people with disabilities
- > describe strategies which maximise participation in decision making by children and young people with disabilities
- > describe strategies to assist children and young people with disabilities maintain contact with their birth families.

## Session Outline

1. Introduction
2. Stereotypes and realities about disability
3. Maximising participation and potential
4. Contact - my family's also important to me
5. Conclusion

# What are “disabilities”?

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**Children and young people with disabilities** is a broad term, which includes

- > children and young people with physical or sensory impairment
- > children and young people with intellectual limitations that result in learning difficulties
- > children and young people with a chronic illness or condition.

In each case the disability may impact on the child and/or young person’s social and emotional development and their potential to participate in their community.

Children and young people in care frequently have social, emotional, learning and/or behaviour difficulties. These can be less “visible” than other disabilities but will also impact on the child or young person’s potential to fully participate in their community.

# Stereotype or reality?

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1. Children with Down Syndrome are always happy and easy going.  
 **True**       **False**
2. The best way to find out what a young person with a disability wants is to ask their carer.  
 **True**       **False**
3. Children and young people with disabilities prefer to socialise only with children young people with disabilities.  
 **True**       **False**
4. Young people with intellectual, physical disabilities are social and sexual beings who need to be able to express all aspect of their personality with a range of people of their choosing.  
 **True**       **False**
5. Participating in decision making for children with intellectual disabilities creates additional stress for them and their carers and is not as important as for other children and young people in care.  
 **True**       **False**
6. Contact with their family of origin is not as necessary for children and young people who are intellectually or physically disabled.  
 **True**       **False**

# Rights of children and young people in care

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These are the special rights of children and young people in out-of-home care in NSW.

1. **You have the right to take part in making decisions affecting your life, including your care placement.** If your worker or carers don't do what you want they must explain why.
2. **You have the right to say what you are thinking and feeling without fear,** provided you respect the thoughts and feelings of other people.
3. **You have the right to make choices about everyday matters** such as the clothes you wear or the food you eat, just like other people your own age. You should also respect the choices and needs of other people, and understand the consequences of your choices.
4. **You have the right to be treated fairly.**
5. **You have the right to be helped and supported if you go to court.** You can choose someone to support you there, and you will have a lawyer to help you tell your side of the story.
6. **You have the right to be treated with respect.** People should always speak to you in ways that show regard for your feelings. They should ask your opinions, listen to what you have to say, and respect your privacy.
7. **You have the right to feel safe, and to be safe from abuse and unreasonable restraint.** A responsible adult should always be available to help you. Nobody should make you do things you don't want to do, unless it is in your interests. If you are taken into custody by the police you must never be put with adults.
8. **You have the right to be told why you are in care.** Your worker will explain any court orders, other agreements or care plans concerning your future.
9. **You have the right to ask for any information that is being kept about you and to read your file.** Your carer and workers will assist you in getting this information. They must never give this information to anyone else unless it is needed to take care of you. You can add relevant information to your file.

*Handout 4 continues on next page >>>*

## Rights of children and young people in care (Continued)

10. **You have a right to family and community.** Your carers and worker cannot stop you seeing people who are important to you, especially your family and friends, and people who are teaching you about your culture or religion. You will either live near these people or have help to travel to see them. Your carers or worker can stop you seeing people they think will hurt you.
11. **You have the right to your own beliefs and way of life.** Nobody can make you change your name, or your religion, or stop doing things important to your culture. If you have a religion or cultural practice then you can keep practicing it and your carers should help you do this. Nobody can force you to break the laws and customs of your culture or religion. You do not need to participate in the cultural or religious practices of your carers or workers.
12. **You have the right to services that promote your health and well-being.** You should be able to see a health worker (such as a doctor, nurse, dentist, counsellor or social worker), or be taken to hospital, if you need to. When you are sick or having an assessment you should always be told what the health workers are going to do. If you don't understand ask them to explain again so that you do understand. You can refuse a test or treatment, provided you understand the full consequences of your decision.
13. **You have a right to extra help with your education.** Your carer or worker will get the help you require.
14. **You have the right to do some things you enjoy.** Your carers or worker will make sure you can do things like sport or your hobbies, as long as they are legal, affordable and not dangerous.
15. **You have the right to planning and support before leaving care, and to support and assistance after leaving care.** If you are 15 or over when leaving care a worker will provide assistance until you are 25.  
Children and young people also enjoy other rights, such as under international agreements, and these also apply to you.
16. **You have the right to complain** if you are not satisfied with the quality of the care you are receiving. Information about how to complain is included with this charter.

*From the "Draft Charter of Rights for Children and Young People in Out of Home Care in New South Wales"*

# Standards and expectations in NSW

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- ★ Privacy, dignity and confidentiality should be recognised and respected in all aspects of the life of a person with a disability.

*From the NSW Disability Standards: Standard 4: Privacy, Dignity and Confidentiality*

- ★ People with disabilities should be supported and encouraged to participate and be involved in the life of the community.

*From the NSW Disability Standards: Standard 5: Participation and Integration*

- ★ Each person with a disability has the opportunity to develop and maintain skills and to participate in activities that enable him or her to achieve valued roles in the community.

*From the NSW Disability Standards: Standard 6: Valued status*

- ★ Each person with a disability receives a service which recognises the importance of preserving family relationships, informal social networks and is sensitive to their cultural and linguistic environments.

*From the NSW Disability Standards: Standard 9: Family Relationships*

- ★ “Whenever a child or young person is able to form his or her own views on a matter concerning his or her own welfare, he or she must be given an opportunity to express these views freely and these views are to be given due weight in accordance with the developmental capacity of the child or young person and the circumstances.”

*From the Children and Young Persons (Care and Protection) Act 1998 Section 9*

# Vanessa's story

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*Vanessa is 14. She's into pop music and loves watching football. She takes a keen interest in clothes. She often experiments with new hairstyles on a Friday nights when she goes to youth group.*

*Last Friday night after youth group Vanessa said, "I want to go on camp with the people from the youth group at Easter, it will be great fun and I'll get to camp for four days in the bush".*

*Vanessa has only ever been on holiday with her carers Dale and Deanne. The camp is open to all high schoolers, so there will be young people aged 13 - 18 attending. They are concerned that Vanessa (who has Down Syndrome) will not be able to do what is expected regarding tasks such as pitching tents and catering. They do not think she will to keep up with the other young people on the camp and she will not "fit" in with the other young girls and boys on the camp.*

- ❖ What might Dale and Deanne be feeling?
- ❖ What might Vanessa be feeling?
- ❖ How might Deanne and Dale raise their concerns with Vanessa and ensure she has a say in the decision?
- ❖ How can Vanessa's right to experience new and different things be promoted in this situation?

# David's story

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*David is a 9 year old boy. He is gregarious, a keen swimmer and a whiz at making milkshakes. David came into care after his mum had her fourth child.*

*With three children under 5, Tanya found it hard to cope. David has a learning difficulty with problems in retaining information, sequencing, reading and writing. His attention span is short.*

*David has been in Jo-Jo's care for nine months. Jo-Jo has spent lots of time with him doing remedial reading and he is slowly progressing. He has a speech problem and Jo-Jo is also concentrating on helping him to speak more clearly.*

*David has contact each school holiday. David enjoys his time with his siblings. Tanya enjoys his visits, but is exhausted at the end of each school holiday.*

*When David comes home from visiting his family he becomes withdrawn. He spends time in his room and damages toys Jo-Jo has given to him. David resists any attempts on Jo-Jo's behalf to comfort him and continually asks when he can see his mum again. After contact David soils himself and hides the soiled pants all over the house. Jo-Jo wishes at times that David didn't have any contact at all with his family. She avoids mentioning his family because it just seems to make him more upset.*

*Issues in relation to contact came to a head when Jo-Jo hears a noise early one morning and discovers David sneaking out of the house with a plastic bag full of clothes. When asked what he was doing, David said "I'm going home. My sisters don't care that I'm stupid. Mum says that soon I can take care of them all by myself."*

- ❖ What might be David feeling in relation to contact?  
What might be some of his needs?
- ❖ In what way may David's disability be affecting issues around contact?
- ❖ How can David's ideas about contact be discussed with him in a realistic way?
- ❖ How can the caseworker, Tanya and Jo-Jo ensure that David wishes in relation to contact are heard?

