



"LIVING IN NEW KINDS OF SITUATIONS"

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TRAINING FOR TODAY

An Adult is Determined by Virtue of Age and Not Intellect, Part II

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As discussed in the previous article, the subject of age appropriateness as it relates to the persons we serve tends to illicit feelings of defensiveness, ambiguity and confusion for many of us.

*** DO NOT BLAME PARENTS OR OTHER FAMILY MEMBERS** - Historically, we have explained if not defended the presence of age inappropriate items by indicating (metaphorically) that John's parents give their 35 year old son stuffed animals every time they come to see him. Not unlike many of our staff, parents may find it especially difficult to see their 35 year old son—who does not verbalize his needs, uses a wheelchair for mobility and depends upon others for assistance when eating—as a man who deserves the same dignity and respect as any other 35 year old man of normal intellect.

We must train the staff to recognize that it is our responsibility to assist parents, siblings, etc., to relate to their family member with mental retardation with the dignity

they deserve by virtue of being an adult. We must provide families with lists of possible items they may wish to consider giving to their son, in lieu of stuffed animals.

The process of helping families change their attitude will take time. We should not expect parents to quickly alter an attitude or perception about their son which they have held for years. I have found that staff consistency over an extended period of time is almost always successful in shaping the parents' perception of their son or daughter.

BUT IT'S THEIR RIGHT - I can hear their proclamation now in thunderous tones. I am frequently chastised by the legions of self-proclaimed advocates that I should be damned for my attempts to replace "Johnny's" yellow rubber duck with a more suitable item. They tell me that though "Johnny" is 40 years old, he loves his yellow rubber duck and spends many enjoyable hours on the living room floor playing with it, smiling in response to the squeaky sound it makes when

"Johnny" squeezes its tail. "Who do you think you are anyway to take away the one thing he really enjoys?"

Sound familiar? The defenders of the yellow rubber duck inform me in no uncertain terms that "it is his right to play with the yellow rubber duck!"

I acknowledge that John may have that right, but I retort that I believe he has many other rights—rights which in my opinion are far more important in achieving a quality life than playing with his duck. For John has the right to grow, develop and become more independent and I have the moral and ethical responsibility to assist him in that process.

The untold hours John spends with his duck are hours that he is being denied his right to learn more relevant social and recreational skills. What about John's right to develop the skills that will allow him to participate in a game of horseshoes in the backyard or the park down the street? A game that will enhance his relationships with others and promote his ability to take turns, stand in line and share.

I believe that so often staff defend

and justify age inappropriate activities of the men and women they serve under the guise of—its their right—when in fact the staff have failed to identify, promote, and encourage the individual's participation in more age relevant activities.

The insinuation that I would take John's yellow rubber duck from him is also incorrect. I train staff to create options for individuals in such a manner that the duck will no longer be a preferred option.

A fool—and a heartless one at that—can take things away from people. We must learn how to identify and present more relevant options so that the yellow rubber duck (metaphorically) is no longer the item of choice.

Frequently, the options and alternatives we present must be creatively introduced. I recall a woman in her late fifties who recently moved into a home where I was conducting staff training. The woman, who used a wheelchair, moved to the home having spent a life time in a large state-operated institution. She was holding onto (clutching) a large stuffed animal, that smelled terribly. The animal was intended to be a replica of Bambi. I shared with the staff my feelings of how inappropriate it was for the woman to be clutching a stuffed animal.

The staff, not sharing my values, beseeched me not to remove the animal, for it was all the woman had. Their observation that the stuffed animal was the sum total of this woman's earthly belongings was a stinging indictment of the environment in which this woman had lived for so many years. I vividly recall the woman holding onto Bambi with both hands, hugging the animal to her bosom. This behavior was so persistent that the woman would not even assist in turning the wheels to her wheelchair for fear of dropping her "precious Bambi."

I then presented the staff with a challenge. I said, "without taking Bambi away from the woman, what can we introduce to the woman that

she may desire to hold in lieu of Bambi?" One staff immediately suggested that we give the woman a purse. I pointed out that we could give the woman a really big purse and put Bambi on the inside. If we zip the purse closed, maybe Bambi will eventually die from lack of oxygen and we can hold a funeral and bury Bambi in the backyard.

Though this is a humorous anecdote the essential concept was brought home and clearly stayed with the staff in this training situation. That is, we must find alternative options for individuals that will enhance their dignity and promote opportunities for increased independence.

* THE RELATIONSHIP BETWEEN ISSUES OF PRIVACY AND AGE APPROPRIATENESS -

In our society we extend a different level of privacy to adults than we do to children. It would not be unusual to observe a parent changing the diaper of their 6 month old child in a public park without the benefit of any privacy. I am not making a value judgment; I am merely noting a common observation.

The issue of privacy as it relates to age appropriateness is a key point. Often staff in training believe that the issue of age appropriateness is primarily one of philosophy. In fact, nothing could be further from the truth. The correlation between the presence of age appropriate items in an environment and the assurance of privacy is very high.

In this regard, I can visit a home in which people with mental retardation live and with relative assurance describe the privacy available to the adults living in the residence, even if I visit when no one is at home.

As indicated earlier, age inappropriate items serve as a discriminative stimulus and their presence illicit from staff age inappropriate responses. Thus staff knocking on closed bedroom doors before entering, prompting individuals to close the curtains in their bedrooms before undressing, etc., are far less likely to be assured in

homes containing age inappropriate items.

In a recent training seminar a most dignified older looking woman listened intently to my presentation, taking copious notes on the topic of age appropriateness. I was informed by the administrator of the agency which contracted for my training services that this woman held three significant roles. She was a mother of a 30 year old man with Down syndrome, a QMRP, and a Board Member.

During the early phases of the training, the woman asked several questions that led me to believe that she felt much differently than I on the issue of age appropriateness.

Immediately upon the conclusion of the training, one of the participants came over to me still unsure of her position in this matter and seeking support that would bring her over into the "camp" of preference.

While I was speaking to the participant relative to her difficulty in resolving her position on the subject, I noted that the mother of the man with Down syndrome was anxiously waiting to talk with me. It was quite evident that her eyes were filled with tears. I asked the woman to whom I was talking to excuse me for a moment while I turned to address what appeared to be the more serious concerns of this mother.

I asked, "Is something wrong?" She firmly grabbed both my arms and with tears in her eyes looked at me intensely and said, "Thank you—tomorrow will be the first Halloween in 30 years that I will not dress my son up in a costume and parade him up and down the street as a clown."

After pausing for a moment, I told the mother, "Thank you for sharing your feelings with me, but what will your son do on Halloween night?" She, too, paused and said, "Pass out candy to the children who come to the door."

The participant to whom I was originally speaking listened intently to this entire conversation whereupon she turned to me and stated, "I think I now understand."