

7 Questions that Those Who Support People with Disabilities Should Be Able to Answer

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Those who support and those who develop plans with people who have disabilities should be able to answer the following 7 questions. The plans that are written with people who use disability services should contain these answers. The services and supports provided should reflect the answers to these questions.

1. What is **important** to the person?

What the person is telling us with words or behavior. This does not include things that we believe should be important to the person.

Where people do not use spoken words it is what they are telling us with their behavior. Where what people say seems to reflect more of a need to please than a reflection of what is actually important to them, what they do will usually be a better reflection of what is important than what they tell us. Issues of health and/or safety are often important to people. How important they are needs to be considered by looking at behavior. For example many of us say that we should lose weight and eat a balanced diet. Most of us are slowly gaining weight and eat diets that have too much fat in them. Our behavior says that eating is more important to us than is losing weight.

2. What is **important** for the person?

What others believe is important for the person. It includes issues of health and safety. It also includes those things that others feel will contribute to being accepted and/or valued even where they do not reflect an issue of health or safety. (E.G. Someone's appearance, how they dress.) What is important to the person and what is important for the person typically overlap but are not identical

3. Is what is **important** for the person being addressed in the context of what is **important** to the person?

We always deal with those things that are important for us in the context of what is important to us. Losing weight, quitting cigarettes, or managing a chronic health issue happens for each of us in the context of what is important to us. Where what is important to us is absent we are more likely to ignore or even act counter to what is important for us. When we have a bad day due to the absence of what is important to us, we may comfort ourselves with food that is fattening. This is not a problem if you have an occasional bad day but is an issue if it is a bad year or a bad decade. Much of

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the problem with the ways in which issues of health and safety have been dealt with has been that they have been treated as if they had no context. When what is **important** to the person has been largely ignored is more difficult to have the person's support in addressing what is **important** for the person.

4. Is there a **“good”** balance between what is **important** to the person and what is **important** for the person?

Each of us determines the balance between what is important to us and what is important for us. For most of us there is made easier by the significant overlap between what is important to us and what is important for us. It should only become an issue (for those who love us and for those we support) when what is important for us is difficult or impossible to have present in the context of what is important to us. When we are sharing control with someone who uses disability services part of what we should do is to help the person find a good balance. We need to remember that this is a shifting balance that changes as what is important to us changes and as issues of health or safety recede or emerge.

5. What does the person want to learn, what else do we need to learn?

Helping the person learn, helping the person acquire new skills, has the same issues of context. Rather than simply helping the person acquire the next skill in a hierarchy we should be looking to see what they might learn that will help them get more of what is important to them. Additionally we are never finished learning about a person and how to support them. Those who plan should be able to say what they don't know, what they are seeking to learn, and/or what they need to learn.

If the person is to get the balance described and we are to learn -

6. What needs to **stay the same** (be maintained or enhanced)?
7. What needs to **change**?

Plans that are to help people get the lives that they want need to have actions associated with them. Too many “person centered plans” reflect what is important to the person right up to the part of the plan that describes what is actually going to be done. They then lapse into only dealing with what is important for the person or what is perceived as required. Plans that help people move toward lives that they want which also reflect a balance between what is important to and what is important for the person should have goals and actions that describe -

- What does the person and those who support her or him need to do to maintain or enhance what is working?
- Given any difference between how the person is living and how the person might like to live and what else the person might like to learn (or we need to learn) what needs to change and what can happen to create change?