Ought: The Journal of Autistic Culture

Volume 2 Issue 1 Autism and Neurodiversity

Article 8

2020

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Recommended Citation

Gikas, Suzanne J. (2020) "The Blue Room," *Ought: The Journal of Autistic Culture*: Vol. 2 : Iss. 1 , Article 8. Available at: https://scholarworks.gvsu.edu/ought/vol2/iss1/8

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The Blue Room

Suzanne J. Gikas

I n law: to the maximum extent appropriate, children with disabilities, including children in public or private institutions or other care facilities, are educated with children who are non-disabled. Educational needs are met through a continuum of available services that include alternative placements. (Individuals with Disabilities Education Act of 1997, 2004).

In practice: The emphasis on a 'continuum' of services suggests a gradual, sequential change. Yet, when I accepted a position in a federal setting four several years ago, my perception of that placement was so far removed from my concept of normalcy, that I felt displaced from reality.

My journey was a continuum. Each day I traveled through a small town, passing children walking to school or playing at bus stops; seeing the stores and offices light up; watching for cyclists and people walking their dogs as I merged with others going about their normal, daily business. The busy canvas was swiftly shrouded by a sharp left turn that snaked through a beautiful sunlit, wooded landscape that slowly lifted like mist to expose a muted, gray, looming stillness.

An enormous gray building, sharp, angular, and glassy commanded a large gray parking lot. As I walked in silently my footsteps echoed; light whispered to me and the smell of disinfectant clung to me. A row of gray doors led to my classroom. Closed.

This vast gray classroom housed six students. Separate tables screened on three sides were placed at the extremities. My first vision of the room is still blueprinted, freeze-framed, on my mind. Four paraprofessionals were in the room. Elbows. Heads in hands. One looked up at me slowly, reluctantly, without smiling and looked away. It was neither friendly nor obviously hostile yet emotionally sterile. I was told, sharply, to get back, and that is was too dangerous, as I held out my hand to greet a student. I followed the prescribed routines. Day in, day out, buses arrived, a brief dash of yellow on the landscape. Students were moved to their classrooms. Strict regimen. Coats, backpacks, toilets, and breakfast. Within these walls were choices with no choice. Socialization with no proximity. Lessons with no teaching. Beads endlessly threaded onto shoelaces. Fidgets, fidgeting. Lights, lit and unlit. Buzzers buzzing or still. Plastic boxes were offered *ad nauseam*. The mundane tedium was punctuated only by routine events. Students were moved *en masse* to the gym and the cafeteria and then moved back to the classroom. An enthusiastic teacher would routinely come with art activities.

Within these gray walls, I experienced an overwhelming, permeating monotony, a perpetual continuum of banality. Nothing was to be changed. The Resource Specialist determined resources. Behavior plans had to be learned verbatim. The crisis team maintained safety. Routine, rigor, and carrels were paramount. The unspoken breath of restriction permeated every niche of the mental and physical environment.

I felt that I must have reached the end of the continuum and yet I was assured that the programming was appropriate, least-restrictive, and widely acclaimed in the community. Yet, despite my plans, hopes, and dreams to inspire and invigorate, within months I only had to cross the building's threshold for an overwhelming sense of gloom to descend upon me. Inevitably, within months this sense of gloom was to be reignited with a sense of moral indignation.

There was one student who was receiving interventions under the direct supervision of the Applied Behavior Analyst. She was non-verbal. Her program goals centered on making choices using Picture Exchange Communication Symbols (PECS). At intervals, throughout the day she was presented with two cards. The Resource Specialist would tap a fingernail on two cards and say "this or this". There was little relevance to this task as there was typically only one item available.

The student was 15. Each day, immediately after breakfast, she was led away by two paraprofessionals. As soon as the paraprofessionals emerged the student would start to wring her hands. She seemed reluctant to cooperate and often struggled when she was lifted out of her seat. Her intensive interventions were to take place in the blue room. Highly focused, reduced stimuli.

The blue room was overwhelmingly blue. The mats on the floor and walls were blue with a suffocating reek of plastic. To the left of the door was a gray desk and a barrier separated the room into two sides. One chair was placed on one side of the desk. Two chairs were placed on the side where the student was placed. She was moved onto a chair and one of the paraprofessionals sat next to her.

Then it began. The student was offered an M&M. She pressed a button. She was given an M&M. The process was repeated. The process was repeated sometimes for hours. Boxes were checked for button pressing. Then the student was returned to her classroom. The next day, and every day throughout the year the process was repeated. The only apparent change was that the student seemed to attempt to protest. The paraprofessionals reported that she was dropping to her knees and biting her hands as she approached the blue room.

It was difficult for me to make sense of the situation. I had no touchstone for reference for this point on the continuum. I accompanied the paraprofessionals to the blue room to observe the situation. If the instruction was to take place in such a restricted vacuum, then it seemed important to set up teaching to promote generalization of the skill across environments and to work to fade the blue room. My request was not acknowledged.

What I realized was that Least Restrictive Environment and continuum did not just apply to individuals with disabilities, it applied to me. I was as restricted by these practices as my students, alienated from my ideals and my concept of normalcy.

My formal complaints were acknowledged. My resignation was submitted and I took my final drive through the wooded lane where a sharp right turn took me through the small town, past buses, and children walking home. Merging with people returning from work.

References

The Individuals with Disabilities Education Act of 1997, 34 C.F.R. §§ 300.114-300.115 (2004).

Suzanne J. Gikas is an Assistant Professor in the Department of Education at Augsburg University. Dr. Gikas' research and teaching interests center on social justice and advocacy for families. Her primary area of expertise includes a focus on autism and Special Education Law. Suzanne has been a licensed teacher for 29 years, working in special education settings as a teacher, leader, advocate, and consultant.