Countering the “career of disability”: from clinical institutionalization to the creation of opportunities for biographical change

The intervention of the Service for Integration, Accompaniment and Orientation for students with disabilities of the Municipalities of Melzo and Liscate (Mi)

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Abstract

Starting from the normative references Italian (the Italian State, Lombardia Region) and international (WHO, UN), this paper aims to highlight how a municipal service can take action against students with disabilities by creating opportunities for inclusive education that prescind from the same disability. In fact, the Service does not intervene on a single subject in terms of assistance, but the construction/deconstruction of the role of disability, therefore involves the whole community in implementing actions of shared responsibility. These procedures outline a system of innovative intervention to disability based on the transformation of the social processes that generate the identity of the disabled and the development of skills of the subject rather than on the medicalization of the individual.

Keywords: Disability, Scholastic Integration, Labelling, Community Project, Social Integration.

1. Introduction

The normative frame within which one places the Service for Accompaniment and Formative Orientation in favour of students with disabilities is provided by a strand of institutional reforms on the one hand, to promote the construction of an integrated intervention and services system (Lombardy Region, 2008, 2011; Italian State, 2000) and, on the other, to protect the rights of persons with disabilities (Italian State, 1992 and subsequent amendments) with the adoption of the International Convention (UN, 2006) on the Rights of Persons with Disabilities.

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The realization of the principles of the aforesaid reforms and conventions is directed to guarantee interventions, services and actions which can be used to promote the quality of life for all citizens; to guarantee equal opportunities; to prevent, to eliminate or to reduce the conditions of need and lack of security; to sustain runs of scholastic inclusion/social/work the on-going education, employment and place in society of those individuals with a disability.

2. Field of application: health promotion

In this scenario, the integrated service system is configured as a network of shared responsibilities (institutions, the third sector, informal networks, families, etc.) aiming to ensure equal opportunities and to promote the quality of life of students with disability.

Dealing with equal opportunities and the quality of life and well-being, the integration of services within the field of application of the system becomes, as defined by the WHO (WHO, 1995), "Health Promotion". This is configured as a process involving the entire national system, in terms of which the comfort and well-being of the individual citizen cannot be disconnected from those in the wider context in which they live, either in terms of the role of the community or the services that are provided.

As far as health services are concerned, it is intended therefore that “the whole of the discursive modalities used by all the citizens in generating theories that contemplate, in terms of anticipation, the insurgence of pathologies (medically defined) and/or the generation of theories with regard to the illness (defined in terms of sense common)” (Turchi & Della Torre, 2007).

It is in this context that the Service for Integration and Accompaniment and Orientation operates, its final aim is to promote the competent management of the culture of the health in the country.

From this, we can consider disability to be, not an existing reality, but the product of a discourse (Gee, 1999; Harré & Gillett, 1994), which is often based on objective truths, from which we can anticipate the generation and categorization of processes labelling children (Iudici & Faccio, 2013a), that is the attribution of stable characteristics and dysfunctional characteristics. (Iudici et., 2013; Iudici & Faccio, 2013b).

3. Type of users

In reference to the elements described above, there are two types of users:

The designated user. This refers to the subjects for which it is anticipated that there is the generation of a biographical career of "disabled" or of "familiar of disabled" and compared to which it is possible to detect the need for the development of skills within the scope defined above.

The Service therefore does not only take care of the “disabled”, but also of all those people constitutes a destiny marked that makes conditional the usability and accessibility of roles and contexts, beyond the real verifiable deficits in sanitary field. From this perspective, the "disabled family" can be configured in terms of a biographical career when being "family of" becomes the predominant or sole reference around which an individual organizes his biography.

The indirect users. This refers to all stakeholders who, for various reasons, manage processes related to training designated users.

4. “Biographical way” vs “biographical career”

In terms of “biographical way” we mean that the existential journey cannot be identified in a single social role. It is therefore a construct which highlights the possibility that the person may be defined using different “voices” and in different ways. The social status in terms of a reference is that of a "person" and, as such, each person has access to different activities and different social roles.
“Biographical career” refers to the set of beliefs, convictions and ideas deriving from a single role. In such a case, the role of the "disabled" becomes pervasive in that he will be delineated throughout life as having a marked destiny (Turchi & Della Torre, 2007).

This can be seen when the disability is taken in terms of disease and interventions to people with disabilities rely solely on assistance and rehabilitation.

Management of the disabled in this way means that the social status of the person with a disability passes from the status of a "person" with a future open to multiple possibilities, to "disabled", suggesting a "sick" role by which to describe the whole person. This means that teachers, parents, experts and peers, talk about the student with a disability not in terms of what s/he is as a "person" ("fun buddy", “student capable”, “boy unreliable”) but in reference to his/her disability.

5. Integration, Accompaniment and Orientation Services: features of a “Generative Architecture”

The object of the Service for Integration, Accompaniment and Orientation is not circumscribed by the management of personalized projects. It also looks at how the different actors in the network interact in the management of a “biographical way” in contrast with the "career of the disabled". The service is based on the adoption of an intervention system that focuses on "health promotion" from the entire relational net of the "biographical way", anticipating and countering the labelling processes. This implies the need for all the actors working on the "biographical way" of the pupil, to develop skills oriented towards inclusion and, where possible, to allow the pupil to live an independent and participatory life in the community.

Operationally, the service aims to enable the setting up of "networks for the promotion of health" (World Health Organization, 2000, 2002), consisting of informal agencies and resources in a given area, in collaboration with specialists in the use of strategic networks. In terms of this approach, a focal point is the school, whose overall objective (as indicated by the Ministry of Education, 2007) is the development of key skills of citizenship for all pupils. As part of this, disability cannot be managed in terms of a deficit or "lack", but as an opportunity to allow all to play the part of good citizens.

Therefore, to promote health becomes an essential strategy for promoting the creation of a national "Architecture of the Services", founded along precise strategic and methodological lines so that it becomes part of the interactive processes that generates health.

5.1 Projects of proximity to in person favor with disability not inserted in the scholastic circuit or of the services territorial

This action is aimed at those users who are not included in the formal schooling process and who do not participate in institutional activities, either formally or informally. For such users, it is necessary to create personalized support that takes account of the specific difficulties of the person with disability and of their family. (Milner & Kelly, 2009; Walker, P., 1999, Wilson, E., 2006).

The proximity action understood as a strategic intervention within the social context of the user, is configured as an opportunity to involve more actors, to the extent that it facilitates access to opportunities and services for persons with disabilities and his/her family, but also activates the potential of the social fabric in supporting such effective integration.

5.2 Extra educational tutoring

This strategy is intended to support students with learning difficulties but who are not in an educational environment, using a management process which might avoid the attribution of disability or feelings of dissimilarity to the person involved.

The action is disbursed from voluntary, which intervene in the family with the purpose to development skills in the components of the same and sustain autonomy of person with disability. (Greenwood, Paper, & Hall, 1988; Topping, 1996).
5.3 Personalized Projects aimed at developing skills

Personalized projects are the product of collaboration between teachers, child psychiatrists, social workers, educators and the supervisor of the project. They are aimed at children with disability certification and consist of projects designed to develop competences in the subjects themselves, starting from a basis of the competences possessed by the individual child.

Despite being customized, the project intervenes in terms of the present interactions in the school context (Iudici, 2013), among students, and between students and adults (support teachers, school management and educational collaborators).

5.4 Orientation to the school and professional choice

The line of intervention in terms of the "management of the trial of choice" meets the need of the different actors in such a way as to competently manage the biographical student who is the bearer of the disability during the critical phases of choice with regard to the training path (that is the passage from the first cycle to the second cycle of the system of education and formation) the change, the conclusion and the reinsertion in a route of professionalization (formative or work).

Orientation is defined as a process of the construction of criteria for the choice of possible roles which have to be played. It involves a view of integration and usability in terms of the practicable contexts. Therefore, the focus of the intervention is set on the acquisition of the criteria of choice. These are used by the different role players and by the student him/herself, in order 'to choose' a formative run which is consistent with a life project aimed at skills development which will allow social inclusion and/or inclusion in the workplace.

References

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