Understanding Inclusion

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Despite its usage in the disability field for many years, there are important differences in understanding of what inclusion is, how much to value it in relation to other desirable things, and especially what it means for the future of services.

The diagram on the other side of this page maps different understandings of inclusion on two dimensions:

- **Responsibility** – the demand for organizational action required by inclusion. **Low responsibility** means that, however important inclusion may be, it is primarily someone else's task. Low responsibility for inclusion (Quadrant I & Q II) often means putting higher priority on other concerns like using scarce resources to provide current services to as many people as possible or respecting people's or families' expressed choice for current arrangements, or providing specialized interventions for underserved groups. Priority on action for inclusion might increase if funding increased to exceed perceived need for adequate pay and absorption of those who are not fully served. **High responsibility** (Q III & Q IV) sees inclusion as a moral and practical imperative, a matter of social justice and a measure of social responsibility. A service can't produce inclusion alone, but getting much better at the work of building relationships that cross boundaries is central to its mission and high among its priorities.

- **Disruption** – the extent of innovation that inclusion demands. **Low disruption** (Q II & Q III) holds that current practice is generally on track to offer as much support for inclusion as is possible and desired by people and families. Under all but the most unusual circumstances (exceptional levels of funding or heroic levels of family effort) inclusion outside the family circle and service world is unrealistic for people who require high levels of accommodation and assistance. On this understanding, participants in a sheltered workshop can be seen as included in community because they are performing a typical social role (worker) in a local building; residents of a group home who experience group outings are as included as it is realistic to expect them to be. **High disruption** (Q I & Q IV) recognizes that inclusion demands deep change. Services must shift from a mostly inward focus and learn how to engage employers, mainstream resources like post-secondary education settings, and community associations in ways that build collaborative relationships of support for contributing roles. Higher levels of collaboration with people and their families and far more flexible use of service resources are necessary to offer personalized support to individuals as they pursue a normative pathway through life. Current funding needs to shift away from settings that congregate people in a marginal, special world and reinvested in social innovations that actively promote inclusion. From this perspective, inclusion is understood as people filling a variety of valued social roles in typical settings that allow them to act as contributing citizens and to build a more extensive and diverse network of friends, allies, memberships and contacts.

These differences are challenging because commitment matters more in the pursuit of inclusion than compliance does. Law and policy can discourage the forms of exclusion that result from discrimination of the basis of disability, and this matters. But the experience of inclusion wants more than cold toleration of a person's presence. It wants genuine progress toward welcome and opportunities for meaningful participation. And supporting the journey from exclusion to inclusion is more than the correct interpretation of policy and accurate implementation of technique. It demands the kind of social innovation that creatively engages uncertainty and risk and draws strength from personal commitment. Beyond legislating against discrimination, it is more important for policy makers to refrain from making inclusion harder than for them to try to mandate it. Because many people and organizations powerfully resist authority's attempts to require what must be achieved through commitment, those who want to raise the level of inclusion will focus more on demonstrating new possibilities, building relationships, persuading and negotiating than on manipulating requirements and incentives.
Responsibility

Q I
Influence the Public
• It’s up to law and policy makers, influenced by advocates, to shape a more inclusive community by educating the public and discouraging discrimination.
• Services can play a part in community change but are already very heavily committed to providing day-to-day support.

Q II
Maintain Course
• Inclusion is one value among several. A higher priority is protecting funding for existing services and meeting expanding need in a climate of fiscal restraint.
• The degree of inclusion a person experiences is a matter of individual choice and abilities; those for whom it is not realistic or desired need the option of good local services that provide opportunities for meaningful activity exclusively among disabled peers. It’s wrong to judge those who choose less inclusion negatively.

Q III
Refine Current Practices
• Work within boundaries of current service options; find ways to ease transitions among human services.
• Creatively improve techniques for connecting people, one person at a time.
• As new resources become available, consider adding new options specifically designed to support inclusion.

Q IV
Invest in Social innovation
• Systematically build active collaboration with community to open new pathways to active participation.
• Personalize support to valued social roles in community.
• Reinvest existing service resources: deliberately move away from services that group people based on disability.

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