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New marketing campaign

To raise awareness not only within the education environment but also within our community we have launched a marketing campaign featuring three posters outlining three educational areas of interest within CRDS, the BCR, Diplomas, Masters and PhD.

The fresh new look featuring current students, graduates and faculty has been a hit. Our website, www.crds.org has also been updated with our new look.

We are pleased to announce the launch of the careers portion of our website. This interactive feature will help students understand the career possibilities in Community Rehabilitation and



Disability Studies. It is also an opportunity to see where some of our graduates have landed in their careers.

We would like to welcome back

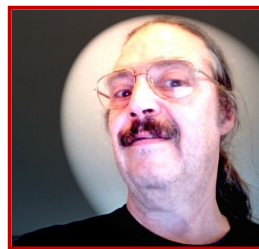
our returning students and to our 96 new students—welcome to the University of Calgary!

Dr. Jean Pettifor Lecture Series

Dr. Dick Sobsey is our guest lecturer

We are pleased to announce our guest lecturer for the Dr. Jean Pettifor Lecture Series is Dr. Dick Sobsey. His topic is “The Ethics of Working with Individuals with Disabilities and their Families in Maintaining Health.”

Dick Sobsey is a Professor Emeritus of Educational Psychology at the University of Alberta. He is Associate Director of the JP Das Develop-



mental Disabilities Centre and a member of the John Dossetor Health Ethics Centre. Dick has worked with children and adults with severe and multiple disabilities

for since 1968. He is author of more than 200 books and articles on disability issues. He is also the father of a 20-year-old-son with severe disabilities who attends an inclusive postsecondary education program at an Alberta University.

Please join us November 23rd, 2010. Email kfedato@ucalgary.ca or visit our website www.crds.org

*Caregiving families***Sibling support researched**

“The goal of these projects is to build better understandings of and resources for sibling support providers.”

Bonnie Lashewicz, who joined CRDS in summer, 2009, is developing her program of research about the capacities and complexities of caregiving families. She is particularly interested in the nature and potential of support provided by adult siblings to people who have mental health issues as well as disabilities and to people who are aging with disabilities. Much of our understanding of families, including caregiving that occurs within families, has been built on the study of relationships between generations (parent-child) rather than within generations (sibling). Adult sibling relationships, being at once obligatory and voluntary, provide a valuable framework for viewing support within families as a resource that is vital, yet not to be assumed as automatically forthcoming.

Bonnie is getting two projects underway this fall:

1. Understanding and building sibling capacity to support adults with disabilities and mental



Dr. Bonnie Lashewicz

health issues.

This project will entail one on one and focus group interviews with family members (adults with disabilities and mental health issues, their siblings and their parents) and organization representatives (community organization members, service providers and decision makers) committed to supporting adults with disabilities and/or mental health issues.

2. Healthy and successful aging for adults with disabilities: The importance of understanding and building sibling support capacity.

This project will entail one on one and focus group interviews with family members (adults

with disabilities aged 50 and over, their siblings and their parents) and organization representatives (community organization members, service providers and decision makers) committed to supporting adults with disabilities and/or older adults.

The goal of these projects is to build understandings of and resources for sibling support providers. Views of adults with disabilities and views of representatives from traditionally separate sectors of services to people with disabilities, services to people with mental health issues and services to people who are aging will be central to these understandings and resources.

Please contact Bonnie if you would like further information and/or if you or someone you know might like to be a study participant.

Email:

bmlashew@ucalgary.ca

Phone: 403 220-4980

10th World Congress for Bioethics in Singapore/NCRE conference

Gregor delivers lectures

Gregor Wolbring, faculty member of CRDS, was in Singapore from the 26 July till 5th of August. On this trip, he gave a peer reviewed talk at the 10th World Congress for bioethics on the ethics of brain machine interfaces.

The talk was well attended (25 people) given that there were 7 parallel sessions and he was asked afterwards by various people to give them the PPT.

The second peer reviewed talk was at the 11th Asian Bioethics conference on the issue of energy security, ableism and disabled people.

The talk was very well received and various collaborations were initiated as result of the talk.

Beside giving these official talks he

also gave a talk at the Institute for Water Policy at the Lee Kuan Yew School for Public Policy on of the leading policy schools in Asia.

There the topic was on water security covering among others ableism and disabled people. At the moment they talking about what collaborative projects could be initiated.

Finally he gave the inaugural lecture the first year medical students that started during my stay at the graduate medical school Duke-NUS on the future of Medicine and health care. As with the other talks, this one also let to interest in looking at some joined projects. Beside his academic work, he also met during his stay with leaders from the dis-

ability community to exchange views.

Gregor also presented a paper at the Spring conference of the U.S. National Council of Rehabilitation Educators (NCRE). In 2009 he presented a paper which paper focused on the impact of new and emerging science and technologies onto the health and rehab fields and the identity of health and rehab professionals. As a follow up Gregor conducted a survey of the NCRE members about their views on new and emerging science and technology products and the appearance of new concepts such as enhancement medicine. This year he presented the results of his survey.



Dr. Gregor Wolbring

<http://www.sidint.net/mdgs-and-disability-bridging-the-gap/>

<http://www.bioethicsanddisability.org/crdsbio.htm>

Developmental Disabilities and Aging/Alzheimer's Disease

2010 International Conference

DDAA is hosted by the [Down Syndrome Research Foundation](#) through partnerships with Simon Fraser University, London Drugs Foundation and our valued Community Partners The Mills Family, [SFU Harbour Centre](#) and the [Vancouver Aquarium](#). The conference will be held in downtown Vancouver, host city of the 2010 Winter Olympic and Paralympic Games, on November 19 – 20, 2010. DDAA features expert speakers and presenters from across North America with focus on new innovations, best-practices, and current research findings!

The daily itinerary of speakers and events of DDAA is now available in PDF at: <http://bit.ly/DDAProgram2010>

Conference Registration includes:

- A wine and cheese reception hosted at the Vancouver Aquarium (Nov 18th)
- 2 days of conference attendance featuring expert speakers hosted at Simon Fraser University's Harbour Centre in Downtown Vancouver, British Columbia
 - A delicious catered lunch with our speakers
- Exclusive admission to the Jo Mills Research Awards Gala hosted at the Vancouver Aquarium
 - Networking Opportunities with speakers and other attendees

Register at: <http://www.dsrf.org/media/Registration%20Form.pdf>

Where we are now

BCR Student updates

Dear Dr. Hughson;

Thank you for the opportunity to speak more of what I am doing now with regards to disabilities and community.

Since graduating from the BCR program a couple of years ago, I have worked with children having a variety of special needs. They come to my house or I go to theirs and work on programs that assist in their development. I was doing this prior to taking the BCR training however, I now have a few more pieces to add to my repertoire and the official document hanging on the wall.

In 1991 I began training in Educational Kinesiology which led me to studying other kinesiologies. The most current of these is Dr. Svetlana Masgutova's work in Neuro-sensory-motor reflex integration (MNRI) formerly called Neurokinesiology. With her background in psychology and her studies in the kinesiologies that I mentioned previously and other areas of research, Dr. Masgutova has discovered an amazing link between children's early reflex patterns, their appropriate integration, timing and symmetries and the developmental correlations which are fundamental for neurodevelopment, intentional and learned motor and cognitive skills. She has had great successes with children having Autism, CP, ADHD,

ADD, Learning Disabilities, Speech issues and an array of other complications. Having just returned from another of her family camps this time in Kelowna B.C., I can attest to the benefits of her work as each individual that was worked on had improvements in either flexibility



Susan Terris

(body tension or adaptability to change), anxiety, muscle tone, behaviours etc. Her research has also determined an important link to the autoimmune system as those in her care have decreased some of the issues associated with this.

Dr. Masgutova currently travels the world teaching her work, her students are learning about the concepts of infant reflexes-natural movements, primary movements and repatterning to integrate dysfunctional and non-productive patterns. The primary movements and reflexes expressed by every individual are genetic motor

“programs” of human development. They are essential to survival, especially during periods of stress and danger. During certain events that occur in our life, a child or adult may experience trauma that affects the ability to use the primary movements effectively. These particular movements also define the future motor development and connections between different aspects of our being (coordination systems, movement skills, motivational, emotional, personal, and intellectual).

Over the past few years I have been running my own business to incorporate this work. There is some networking that must yet be done. It would be of great benefit to study the theories further in the University. It would also be great to have Dr. Masgutova come to Alberta to speak further of her work. I need some Alberta support but I have to tweak the questions and determine who I will be asking the questions of. Your feedback would be appreciated.

Thank you again for the opportunity to connect.

Sincerely;
Susan Terris
Www.effectingchange.org

“I was doing this prior to taking the BCR training however, I now have a few more pieces to add to my repertoire and the official document hanging on the wall..”

BCR Graduate regroup after losing job

Age is no barrier to education

Since I graduated from the BCR program in June, 2009, I have been unemployed. The agency that I worked for gave me notice because the client that I had been assigned to would not respond to any of my promptings to go into the community. Apparently, the guardians complained to the agency about a lack of community involvement for their client. I found that it coincided with my graduation from the BCR program. I am under the impression that I suddenly became over qualified.

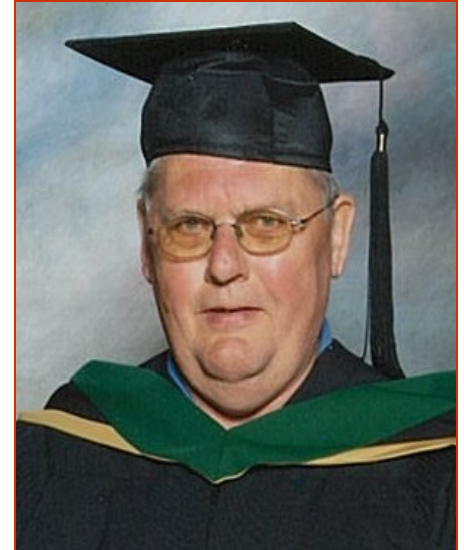
However, this did not deter my ambition to continue with my post-secondary education. I have been a graduate studies student at Athabasca University since last September. I am taking a MA in integrated studies (MAIS) with a dual specialization - adult education and educational studies. I have completed the core courses (theory and research methods) and will be registering into my third course (promoting inquires and curriculum study), which will begin in September, 2010. To complete a specialization, a graduate student needs to complete the two required core courses, select four specialty courses, decide on four electives, and complete the project course with a 60-70 page project paper. In order to complete the requirements for a dual specialization, I need to decide on the four specialty courses for each specialization. The four electives are replaced with a second specialty. The crux of the MAIS degree is to explore, prob-

lem solve, and contribute to social policy change through the integrated studies. When we are ready for our project, we need to stress an integrated studies format using two or three fields of study. The final project that I will be dealing with supported employment. The three fields of study that I will be exploring are: disability studies, adult education, and vocational rehabilitation.

We are given six years to complete our MAIS; we are allowed to take up to two courses per semester. I am hoping to be completed and ready for graduation in the spring of 2013. My professional ambition is to help adults with disabilities return to work and restore their self-esteem and personal dignity.

“I toured the new website and was impressed by the careers section. I think that this will be a boon for my success in finding part-time employment through networking with alumni of the BCR program and graduate students of both the Master of Disability and Community Studies (MDCS) at the University of Calgary and the MAIS program at Athabasca University.”

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Allen Lewis

munity Studies (MDCS) at the University of Calgary and the MAIS program at Athabasca University. I appreciate the contents of the careers section, especially the videos that depict the career possibilities for CRDS students.

I will be turning 60 years old on Monday, July 19, 2010. I became an avid supporter of Lifelong Learning (LLL). Recently, I realized that I will need to think outside the community disability services agencies box. I am certain that there is a position and place for my professional training. I just have to keep an open mind and lots of patience!

Thanks!

Allen Lewis, BCR

Your Opportunity Awaits

It was five months ago in April 2010 when I was finishing my Bachelor Degree in Community Rehabilitation (BCR) at the University of Calgary when I felt somewhat unsure where life was going to take me. I was finally approaching the end to my undergraduate education. I felt excited about the possibilities ahead of me and thankful for the learning and wonderful experiences during the BCR program.

The BCR program was an extremely valuable learning process and provided rich opportunities for discussion and learning. During the program I was practicing within the disability community as a support worker, child-care worker, employment support specialist and positive behaviour support consultant. I worked with a variety of people and I am very thankful to have had those opportunities. My time with those persons created a context for my learning, which enriched my education and contributed to the quality of supports I was able to provide. At the centre of these experiences was a person centred approach to helping and thinking about my role in a helping profession.

The BCR program instilled the importance and benefits of being a reflective practitioner, while using the person centred model of practice. This combination helped me to think about innovative ways to help others and become an effective agent for positive change. Reflective practice helps to foster this level of learning and identify important future learning goals.

We must take responsibly for our learning and ensure we are challenged and supported to grow professionally within the academic and practice context. I believe education is an active process where the student and professional are given moments, tools and relationships to create curiosity and excitement and engage with the world around them. The BCR experience gave me these moments, tools and relationships to challenge myself and support the learning of others. It was near the end of the BCR program when I decided to continue with academic learning and I applied to attend graduate school.

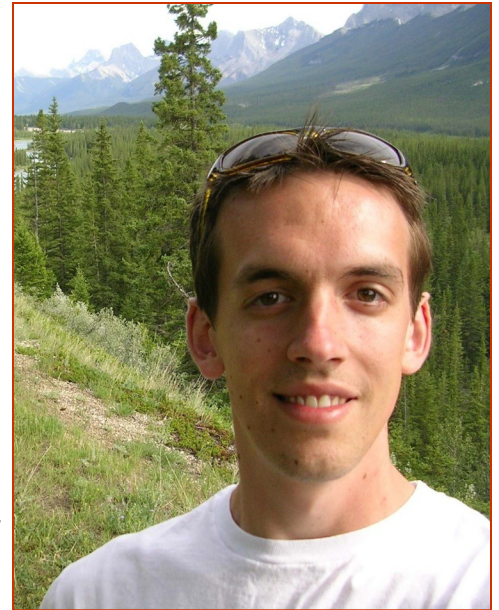
I was later accepted by the University of Western Ontario and given an opportunity to complete my Masters of Science in Occupational Therapy within the Faculty of Health Sciences. It seemed natural to continue my studies in Occupational Therapy. Occupational Therapists use

occupational science to foster health and wellbeing within the population. The BCR program prepared me and provided a solid foundation of learning to further develop the skills of helping others with occupational engagement and development. I am appreciative of the people who have helped me along my own personal journey of occupational growth.

I hope for others to have equal if not richer experiences within the BCR program. It is an opportunity to learn and develop a sense of personal self, which is meaningful and contributes to helping others and a richer community. Thank you for sharing a part of my personal experience within the BCR program. I wish you all the best.

Sincerely,

Jeff Haveman
Student Occupational Therapist
School of Occupational Therapy
University of Western Ontario



Jeff Haveman

Are you a BCR graduate? We would love to hear your story. Please email kfedato@ucalgary.ca and we'll share it with fellow alumni and our community partners.

A graduate Innovation in Higher Education

Dr. Susan Cran & Dr. Nancy Marlett,
CRDS, University of Calgary

In the middle of winter in a hotel room in Edmonton, a group of men and women took over a class of Bachelor's of Community Rehabilitation students demanding that distance education not be limited to undergraduates. It was time for a revolution in the world of Rehabilitation studies; ideas for new content and a work-study model were desperately needed. Luckily, the innovation funding that was making the experiment in undergraduate education possible provided a fourth year of funding to apply what had been learned to a Canadian graduate perspective. And so was born the Masters in Disability and Community Studies at the University of Calgary; a degree that was created with—and for—working professionals that provided access to graduate programs without the traditional mandatory residency.

That was ten years ago. Today, the University of Calgary is working hard to evaluate the same program that originally re-wrote the traditional rules of graduate programs. When first establishing the program, information sessions confirmed the need for a Canadian approach to graduate education that could respond to a broad-based community rehabilitation context. Individual and regional learning contracts enabled students to tailor their program based on local needs, previous work experience, and future aspirations—an option that had been desperately needed at the time. A change in admission was also made: it no longer became solely about grade point averages but became also about educational background and professional research experience. This change modified the way traditional graduate programs previously operated.

The course content has found itself to be an ever-evolving entity: because there are other graduate options available in Canada, the University of

Calgary has now begun to focus more on the leadership, the interprofessional, and transdisciplinary nature of the community rehabilitation field and less on the clinical aspects, which, in Canada are covered more at the undergraduate level. Some of the University of Calgary's new courses, for example, reflect the program's new home in Community Health Science, Faculty of Medicine with a greater opportunity to understand individual, community, and health capacity. So, while earlier students of the program tended to do practice specializations (community based head injury options, sexual education with developmentally disabled adults), the new program gives students an opportunity to tailor their focus and conduct a final project.

The Masters in Disability and Community Studies program, for example, is the most unique of its kind in that it allows working professionals without an undergraduate degree to enter the program provided that they are exceptional individuals who demonstrate leadership qualities and competencies. This is groundbreaking in that it permits individuals to seek the education and professional development that are vital to the growth of the community rehabilitation profession.

In the interest of moving forward, The University of Calgary has worked hard to revise, create, and reconstruct a plethora of courses within the Master's of Disability and Community Studies (MDCS). The new and improved courses include: Social Construction: Health Capacity and Disability, Foundations and Futures of Disability and Community Studies, Leadership and Innovation in Disability & Community Studies, amongst others. In introducing these new courses to the program, individuals will gain a better understanding of health capacity and disability and current/future trends, which is the ultimate goal of the program. Revisions have also been made to the PhD

program (Specialization in Community Rehabilitation and Disability Studies) that will hopefully offer students more flexibility. While the program delivery format has not changed, the course content has been altered to reflect the emerging strength in health promotion of interdisciplinary and transdisciplinary care and community based health services.

After ten years, the Masters of Disability and Community Studies (MDCS) has seen a 95% success rate in student's achieving a masters and/or thesis based degrees (PhD, MSc) that responded to their academic and professional needs in a variety of specialization areas, while working full-time.

The work-study model (a combination of face-to-face sessions complemented with online study) has contributed to this high completion rate. In addition, students bring a myriad of current professional experiences to the learning process and the ability to apply theory to actual practice. Furthermore, both students and program faculty recognize the value of bringing together prior work and life experiences to the graduate process. The University of Calgary holds onto the importance of the theoretical and research foundations of the academic field of disability study, experiences that can be shared with both the Community Health Sciences department and many partnerships across Canada.

Since the commencement of the CRDS-Canadian concept of graduate study, other Canadian universities have come aboard to deliver alternative graduate programs from the traditional course delivery model for community rehabilitation professionals. This is truly remarkable because it is the University of Calgary's belief that providing student access and choice for adult learning is beneficial to all Canadians.

First published in "Rehab Matters" Fall/Winter 2009.

Research Opportunity

Collaborators to create resource on Eugenics

Living Archives on Eugenics in Western Canada

A project funded by:

Community-University Research Alliance (CURA) Program
Social Sciences and Humanities Research Council of Canada
2010-2015

Project Director

Robert A. Wilson, University of Alberta

Team Leaders

Erika Dyck, University of Saskatchewan

Nicola Fairbrother, Neighborhood Bridges

Claudia Malacrida, University of Lethbridge

Dick Sobsey, University of Alberta

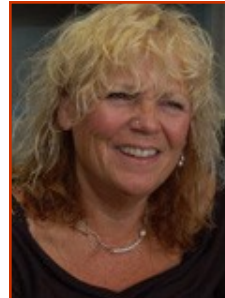
Bruce Uditsky, Alberta Association for Community Living

Gregor Wolbring, University of Calgary

Undertaken by an alliance of 24 research scholars and sterilization survivors, and 12 community partners, *Living Archives on Eugenics in Western Canada* will create a range of academic and public resources for investigating this history. These resources will increase knowledge of past social practices and policies, and will deepen discussions of current issues that were also central to the eugenics movement, such as those concerning reproductive freedom, institutionalization, and the sorts of people there should be in future generations. *Living Archives* will:

- (a) create and develop innovative academic resources for scholars across academic fields, including history, sociology, philosophy, medicine, law, and education;
- (b) actively involve community organizations and vulnerable individuals whose stories have most often been left out of the Canadian collective memory; and
- (c) highlight the contemporary significance of a neglected part of Canadian history

From the CRDS Faculty, Dr. Wolbring with other colleagues will explore links between eugenics and ethical issues, social policies affecting people with disabilities in Canada via community and public dialogue. Dr. Hughson and other colleagues will develop inclusive collective remembering about Canadian eugenics and develop video narratives for input into curriculum materials; and increase community participation and impact through viral archiving mechanisms and the creation of small workshops. The 17 collaborators on *LivingArchives* add significant knowledge mobilization, expertise, and relevant experience to the project. In addition, interested students have an opportunity to engage in research activities and course work related to investigating history of Eugenics and increasing knowledge that influence Post –Eugenics futures.



Dr. Anne Hughson



Dr. Gregor Wolbring

Students based in Calgary and interested in participating are encouraged to contact Dr. Hughson at 403-220-6273 or Dr. Wolbring at 403-210-7083

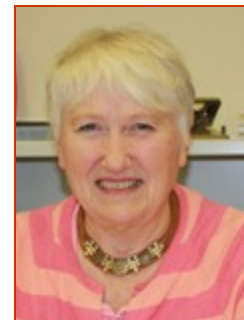
Book launch

Dr. Marlett collaborates on research guide

Grey Matters: A Guide for Collaborative Research with Seniors

Nancy Marlett and Claudia Emes

October 22, 2010
Kerby Centre
1:30 p.m. to 3:30 p.m.



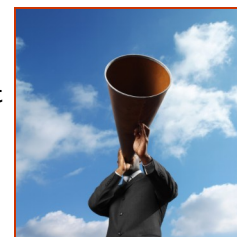
This book opens the door to collaboration among seniors and between seniors and academics, policy makers and community developers. *Grey Matters* began with research sponsored by the Canadian Institute of Health Research about how to involve seniors in all phases of research—from setting research agendas and data collection to knowledge sharing. Because the project was such a success, the authors and seniors were encouraged to make their model available both to seniors interested in undertaking their own research and to those hoping to involve seniors in collaborative research. This guide provides a helpful framework for making the most of research projects by and with seniors, including sections on such techniques as narrative interviews, focus groups and surveys. Sections are included on creating a research project, writing grants, building a research team and publishing results.

We want to hear from you!

Please share your news! If your community group or agency has an announcement or upcoming event let us know and we'll include it in our newsletter.

Are you hiring? Let us know and we'll post your position.

Send your information to kfedato@ucalgary.ca



Community Rehabilitation and Disability Studies

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The Community Rehabilitation and Disability Studies Program (CRDS) was established in 1979 as the first of a growing number of disability studies programs in Canada, and one of the first in North America. It emerged in response to provincial, national and international changes in views of disability. The definition of disability shifted from being seen as a personal trait to being seen as the consequence of social and physical barriers that prevent people with cognitive, physiological or sensory impairments from participating in society. Thus, the aim of this field of study is social inclusion, and the challenge is the removal of barriers.

Within this context our particular focus is on understanding disability at the intersection of community and human services contexts. Towards that end CRDS was designed to be a small, interdisciplinary and inter-faculty university program, thereby building in an ability to examine issues of interest from a number of different perspectives. Central to this from the beginning has been the perspective of people with disabilities.

CRDS provides education pertinent to a broad range of community-based services that offer short-term assistance and ongoing support for individuals, families and small groups affected by disabling conditions and chronic health concerns to live, learn, work and participate in their communities. Research pursued by CRDS Faculty typically is focused on both practical as well as conceptual issues that arise in these contexts. As such, CRDS responds to the challenges of health, education, advocacy, legal and social reform to empower individuals and communities.