

# *Strengths based about to Sexual and Reproductive Justice for persons with intellectual disability*

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THE UNIVERSITY OF  
**SYDNEY**

*Celebrating* **175** *years*

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# UNCRPD Article 23 – Respect for home and the family

1. States Parties shall take effective and appropriate measures to eliminate discrimination against persons with disabilities in all matters relating to marriage, family, parenthood and relationships, on an equal basis with others, so as to ensure that:

- a) The right of all persons with disabilities who are of marriageable age to marry and to found a family on the basis of free and full consent of the intending spouses is recognized;
- b) The rights of persons with disabilities to decide freely and responsibly on the number and spacing of their children and to have access to age-appropriate information, reproductive and family planning education are recognized, and the means necessary to enable them to exercise these rights are provided;
- c) Persons with disabilities, including children, retain their fertility on an equal basis with others.

## UNCRPD Article 23 – Respect for home and the family

2. States Parties shall ensure the rights and responsibilities of persons with disabilities, with regard to guardianship, wardship, trusteeship, adoption of children or similar institutions, where these concepts exist in national legislation; in all cases the best interests of the child shall be paramount. States Parties shall render appropriate assistance to persons with disabilities in the performance of their child-rearing responsibilities.

# Factors which affect the persons with intellectual disability exercising their right to sexual intimacy, and parenthood

- Societal threat (legacy of eugenics discourse)
- Ableism
- Deficit Approach
- Risk-averse practices

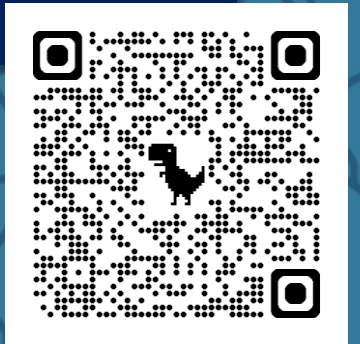
# Being strengths-based involves:

1. Being Disability-Informed
2. Engaging well
3. Adopting a risk enablement approach
4. Prioritising supported decision-making
5. Fostering circles of support



# TOWARD ACCESS & EQUITY

Disability informed practice in Child Protection: A guide to assessing parenting with parents with intellectual disability





# Disability-informed practice principles

## WHAT ARE THE PRINCIPLES OF DISABILITY-INFORMED PRACTICE?

The first principle is that good practice is inclusive and accessible for all.

Professionals who are disability-informed respond as if any parent they engage with may have a disability, and then set out to understand the parent's preferred mode of communication and adapt their practice based on this. Lessons from the extensive field of trauma-informed practice encourages practice development to be seen as a process and a continuum (Wall, Higgins & Hunter, 2016). This can be applied to developing disability-informed practice.



# Becoming disability-informed



## **Disability aware**

Take steps to learn more about disability, disability rights and policy frameworks to address societal barriers and stigma; take up training opportunities and seek out information from reputable sources about parenting with disability.



## **Disability sensitive**

Recognise the need to identify intellectual disability among clients and use a suitable screening tool (see below); share information and resources about disability with colleagues; have information about disability rights, advocacy and services available in the community (e.g., PWDA, IDRS, NDIS).



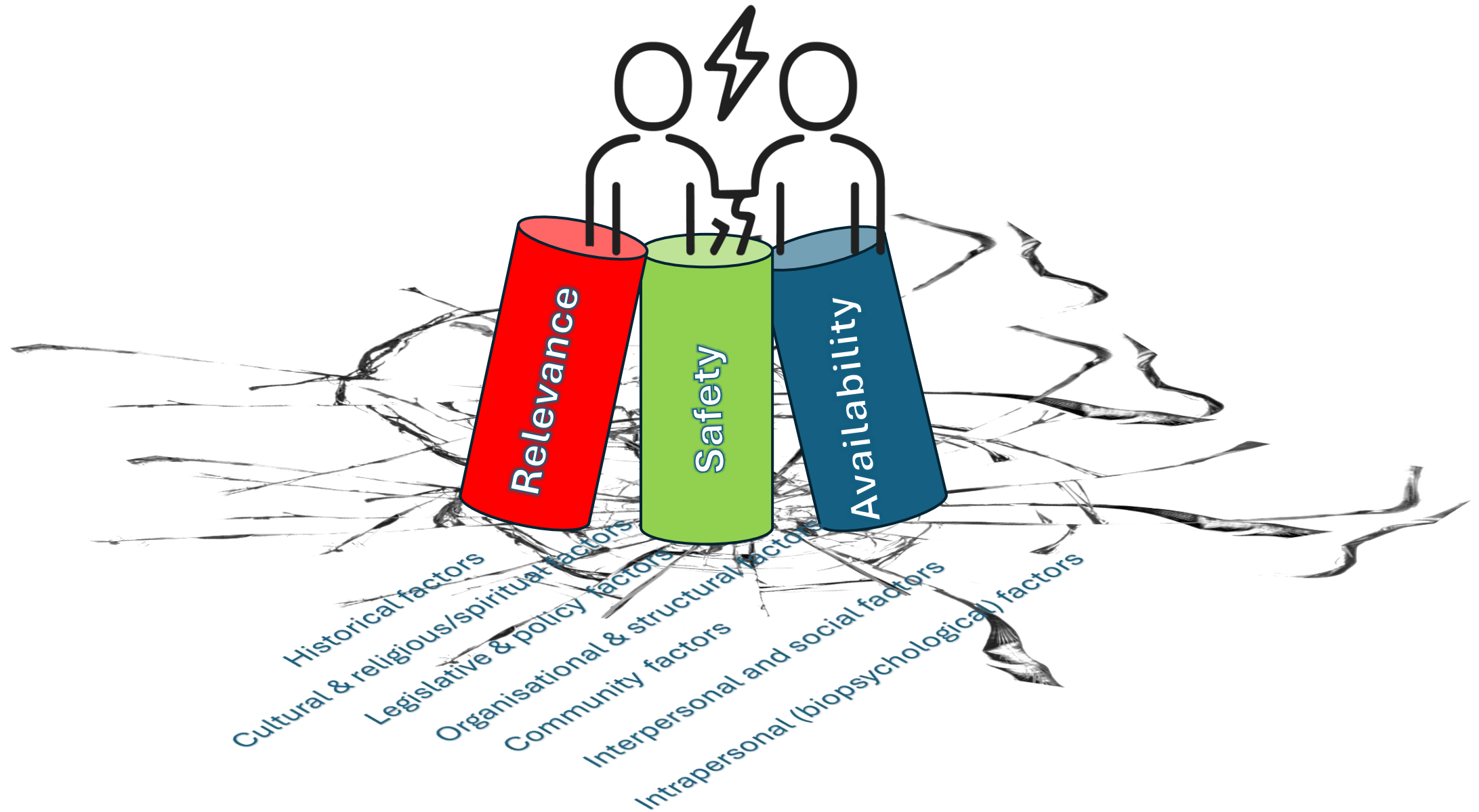
## **Disability responsive**

Incorporate a person-centred approach into your practice by understanding that every person with intellectual disability is different. Take time to learn how the person you are working with views their disability, strengths and limitations, and support system resources and tailor your response based on this information.



## **Disability-informed**

Lead organisational and system change to challenge deficit-based practice and advocate for system-wide reforms that help call out discrimination in processes and practices. Find ways to collaborate with people with intellectual disability and their supporters to create inclusion and equality.



## Three Pillars of Engagement



### Relevance

Make Sense in relation to:

- ✓ Needs
- ✓ Wants
- ✓ Well-being
- ✓ Goals
- ✓ Interest
- ✓ Needs
- ✓ Wants
- ✓ Duty or responsibility



### Safety

Safe:

- ✓ Physically
- ✓ Emotionally
- ✓ Psychologically
- ✓ Cognitively
- ✓ Culturally

From the perspective of:

- ✓ Age
- ✓ Gender & Sexual Identity
- ✓ Experience
- ✓ Location
- ✓ Ethics
- ✓ Policies & Legalities
- ✓ Power differentials
- ✓ Knowledge & Skills



### Availability

Availability is contingent on

- ✓ Biopsychological & cognitive status (Energy)
- ✓ Time
- ✓ Funds
- ✓ Location
- ✓ Accessibility
- ✓ Expectations
- ✓ Competing demands
- ✓ External pressures



Dignity of  
Risk



Duty of Care



**Overprotection**

risk enablement

**Neglect**



# Risk Enablement

- Risk enablement, also called positive risk taking, is a way of supporting people which helps to maintain people's choice and control over activities.

# Risk Enablement Approach

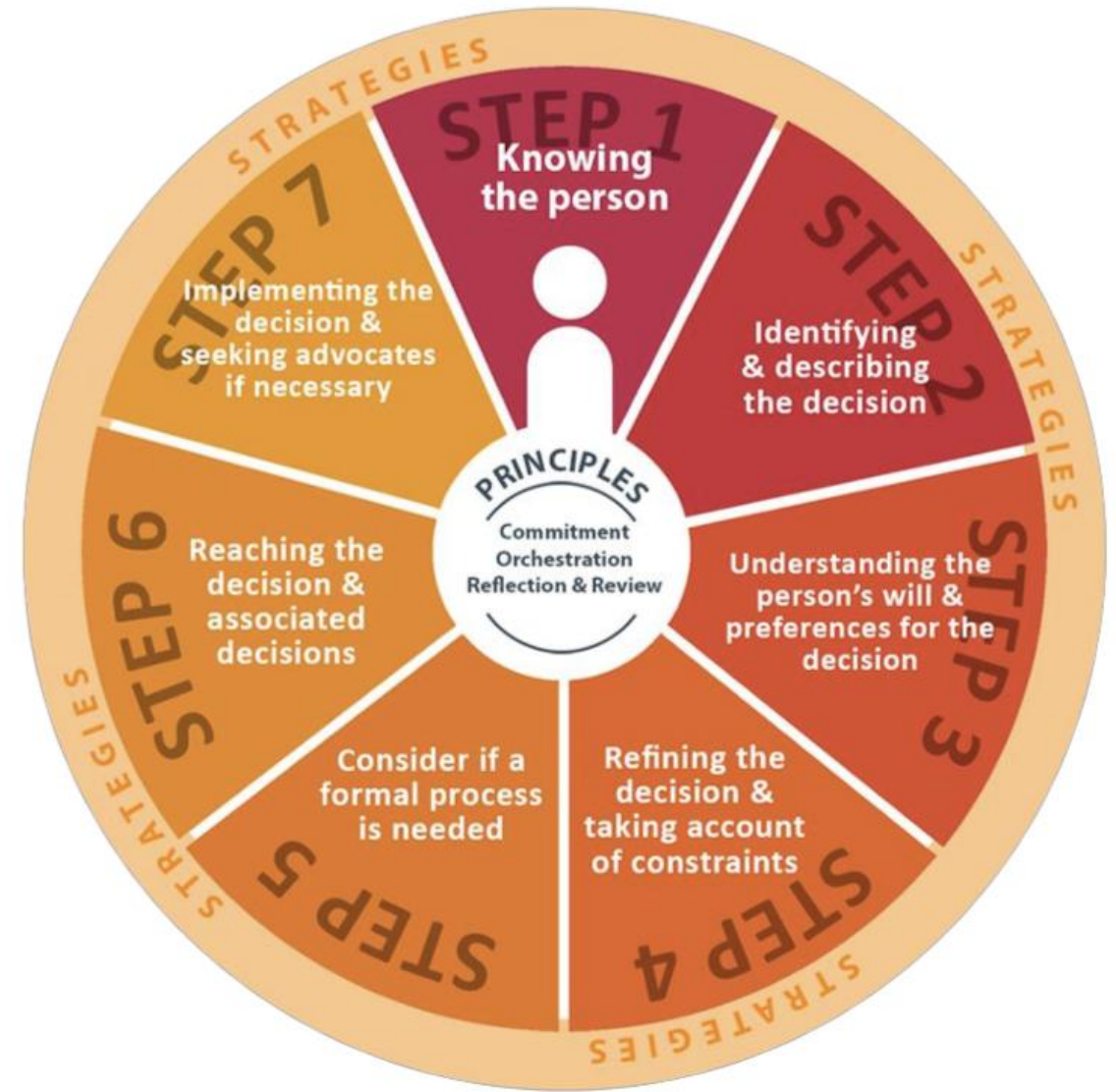
- These are the essential items that need to be considered when assisting an older person to take risks. These include:
  1. Putting Positives First
  2. Staying True to Preferences
  3. Being Proactive
  4. Minimising Harm.
- The 4 Essentials are in no particular order and need to be considered all at once when enabling a person with cognitive disability to take risks. Although not part of the 4 Essentials themselves, being person-centred is required before the 4 Essentials can be further defined and explored to enable positive risk-taking to happen.



Working Together
Taking Account of Context
Planning
Accountability

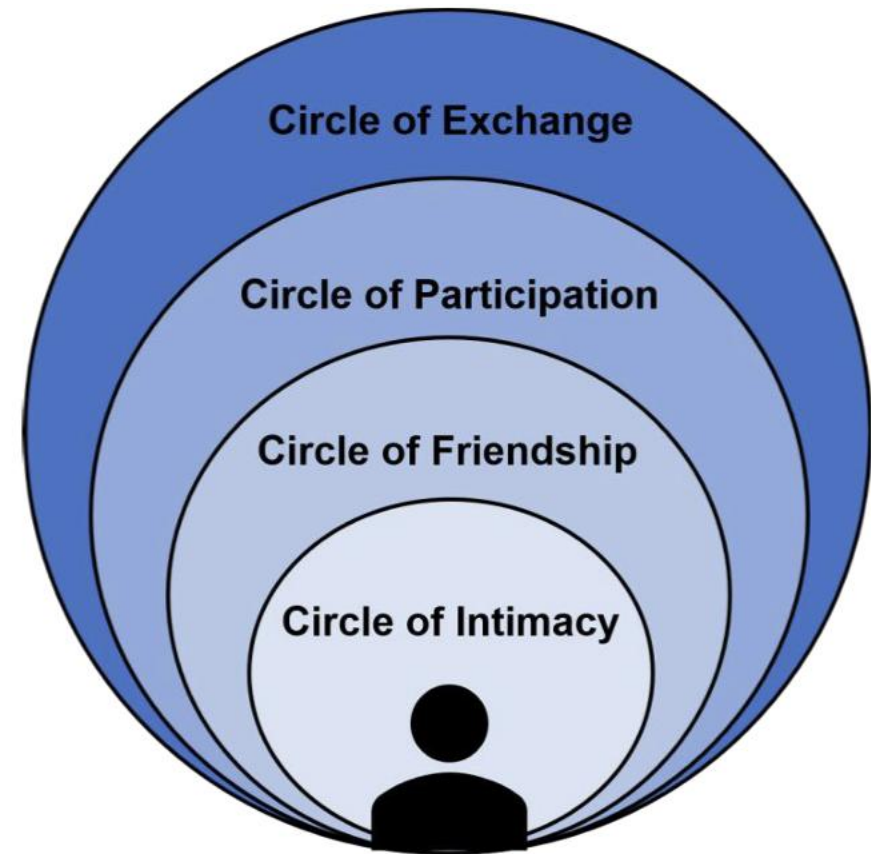


# La Trobe Support for Decision Making Practice Framework



# Circles of Support

1. **The circle of intimacy** – the people you spend a lot of time with, trust, and share emotions, intimate relationships, and private information with. These people are very precious to us and we would miss them greatly if they were not around. You might live with these people.
2. **The circle of friendship** - friends or relatives that we like to spend time with socially. We might see these people occasionally rather than very regularly. You might share interests and news with this group.
3. **The circle of participation** - the people or organisations you participate in and interact with on a frequent basis. This could be clubs, church groups, neighbourhood groups, sports teams, work colleagues, or college friends.
4. **The circle of exchange** - the people that are paid to be in our lives, for example, staff, doctor, dentist, tutor, social worker, therapist, hairdresser.



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