COMBINING CENTRE-BASED WITH COMMUNITY-BASED PRACTICE: THE EXPERIENCE OF A PAEDIATRIC OCCUPATIONAL THERAPIST IN ESTABLISHING AN INCLUSIVE EARLY CHILDHOOD PROGRAMME

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The Essence of Inclusion

Persons **belong** to a social space within which they carry out their occupations. This space, must facilitate purposeful actions and interactions, engender a feeling of belonging, and promote self-actualisation.

The Jamaican Situation 🖌

The population of children with disabilities not determined islandwide, but, STATIN survey (2011) found, of the 485,000 household surveyed, 5.71% are children with disabilities in the age group 5 -14 years.

In the 1970 – 80s basic schools were established in most communities.

Many children with disabilities were not in schools. They were kept at home

Time for Change: Globally

Jamaica was the first country to sign to the UN Convention on the Rights of the Child (1989). Article 23 stated that any child with a disability 'has the right to live a full and decent life with dignity and independence, and to play an active part in the community'

The OT as a part of the change

As OTs

We support, we collaborate, we enable. Do we advocate?

I became an active member of the **Coalition on the Rights of the**

Child to build awareness, to educate and to monitor the

Government's movement towards the provision of education,

health and social services for **all** children.

As mandated by the UN Convention

Identifying A Particular Need

Three years before the UN Convention. I made a move from the C.A.R.E. Centre because I was concerned

Too many children with disabilities were being denied the basic right to be a part of the life other children took for granted. They were just kept at home! Out of sight – Out of Mind! **The general public was not prepared for this type of confrontation**

Identifying a Particular Need

Someone related years later that she was not aware that there was a child with a disability in the home of her next door neighbor until the child became sick and died!

Within their communities persons who were blind and the deaf were seen as 'normal' people **but** were most likely 'affectionately' nicknamed e.g. Blind John!

Making the Connections

I spent many hours building relationships with families of children with disabilities in their homes. A few paediatricians were very supportive. They made the introductions to the parents Occupational Therapy (OT) is a bridge-building profession. We assist in crossing the divide between our clients and their families,

in their places of work, within their communities.

Making the Connections: Centre-based

The McCam Centre opened its doors to 5 students in March 1986. It was an **inclusive** setting by intention. Offering equal exposure to the children

10 years later in 1996 - 60 children were attending an inclusive early childhood programme.

Today - approx. 100 children are seen for assessments and therapy (islandwide utilizing as Clinical Team approach

Making the Connections

McCam Child Care & Development Centre established a

relationship with the Ministry of Education (Special Education) in

1987. This move was providential in positioning the Centre's work

as a forerunner in the practice of inclusion within education (at the

early childhood level).



From McCam Centre to the Community

Schools had to be willing to have our children after completing our programme. I organized the first conference on Inclusion in Kingston (Jamaica) in 1990.

Thirty-two years later, inclusion is well-established practice in many schools



Inclusion in education is one aspect of inclusion in society (Boothe and Ainscow, 2002)

Ministry of Education Team visits McCam Centre.

McCam to be Model of inclusion in ECIs

HEEP – Inclusive Community

- Training for Police Officers who are always present
- Sensitization of Taxi Drivers
- Inter school activities to build positive connections among students
- Meetings with MP to address speed limit within the community, Signs – school zone
- Students' right to access and safety





Story Time



Can we do both as OTs?







In Conclusion

As OTs our mission is always to see our clients /patients as citizens of the world

They may be equipped with the skills to **do**, but they need to belong, to be a part of their families, community groups and the wider society.

I was not aware that I was contributing to a world movement termed 'Inclusion' - I was responding to a need. That is what we do as OTs

