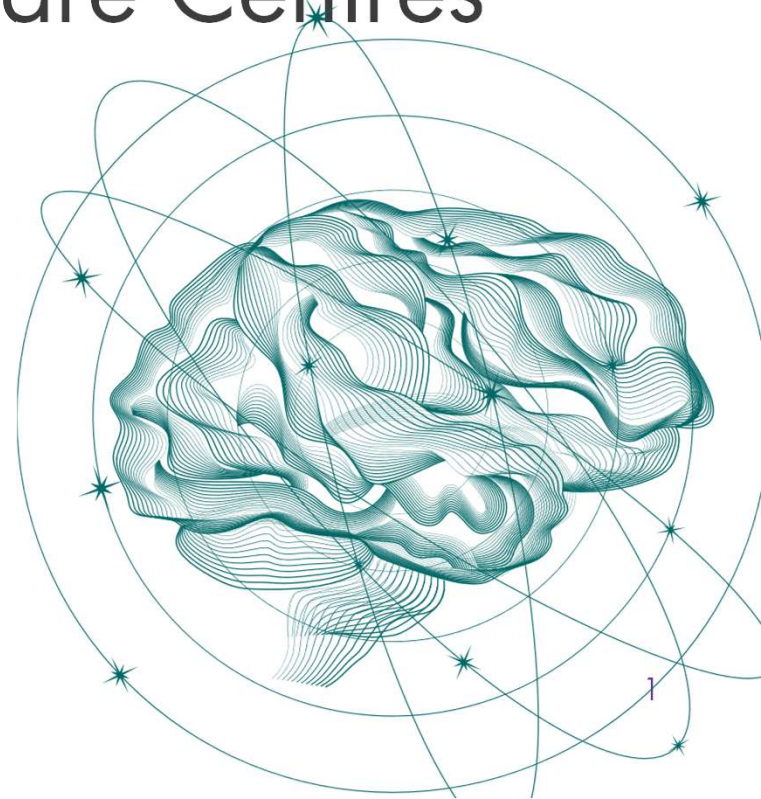


# Using Universal Design Theory to Create Inclusive Spaces: Umbrella Family and Child Care Centres



Presented by Carolyn Rankin-Boutin  
Executive Director, Centre for Diverse Learners



# AGENDA

## 1. Workshop 1

I will explain:

- What is Neurodiverity
- Universal Design
- You
- General Guidelines

You can listen and take notes

.

## 2. Q and A

Ask questions and I will do my best to answer

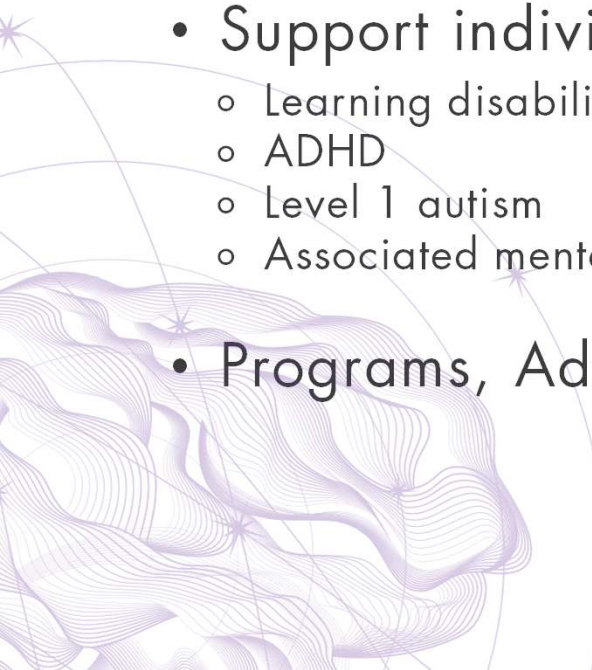


## WHO ARE WE?

At the Centre for Diverse Learners, our mission is to support and empower neurodiverse learners through advocacy, education, and services so that individuals with diverse learning needs are valued, included, and empowered

## WHO ARE WE?

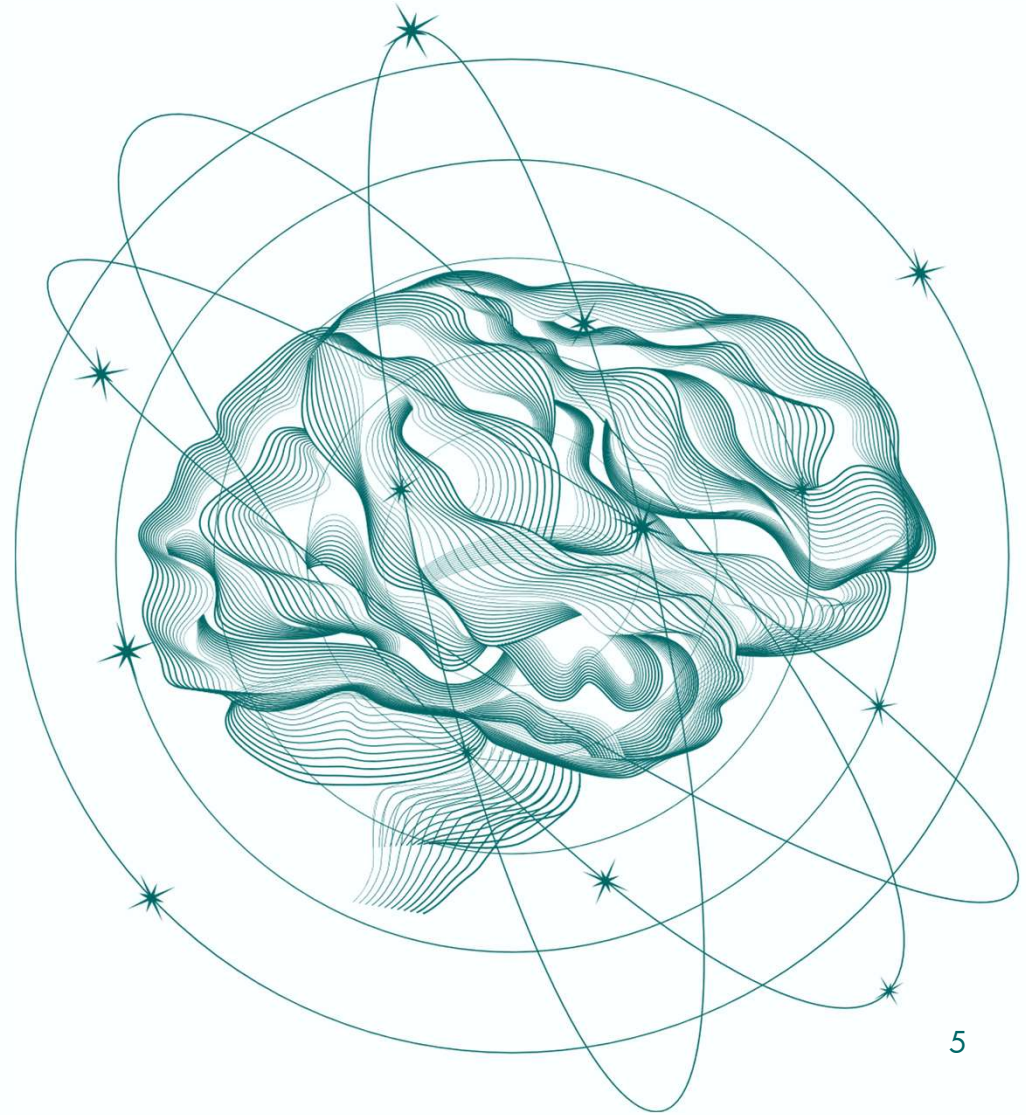
- 60-year history
- Learning Disabilities Association of Halton-Hamilton
- Support individuals with diagnosed/undiagnosed:
  - Learning disabilities e.g., dyslexia, dyscalculia
  - ADHD
  - Level 1 autism
  - Associated mental health, socio-emotional and executive functioning struggles.
- Programs, Advocacy, Knowledge Provision



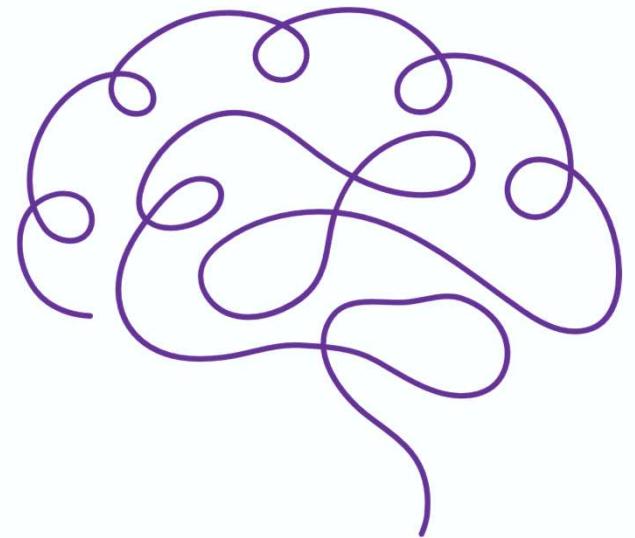




# Neurodiversity



**SO, WHAT IS NEURODIVERSITY?**



# MEDICAL MODEL



Psychological, neurological,  
or physiological limitations-  
disorders/disabilities



Learning disabilities result  
from impairments in one or  
more processes related to  
perceiving, thinking,  
remembering, or learning.

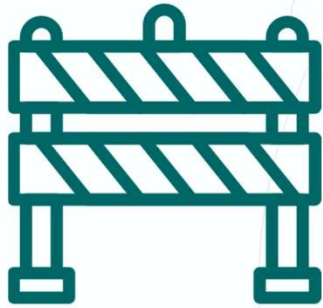
(LDAC, 2015, retrieved Oct 23, 2023)



## Problems:

- Deficit-based
- Individuals need to be fixed.
- Problem based on the individual.
- Need diagnoses to access support.
- Labelling/stigma

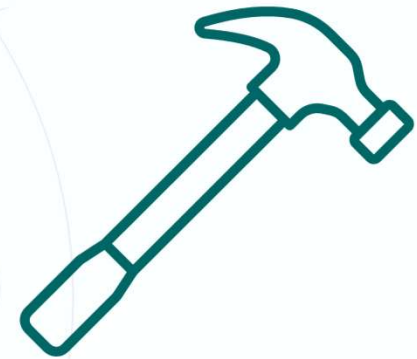
## SOCIAL MODEL



Society places barriers in way of people with impairments.

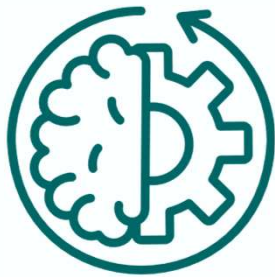


Attitudes, values, and beliefs in society lead to the lack of ability/participation for individuals.



Suggests that everything can be 'fixed' by social changes.

# NEURODIVERSITY PARADIGM



Neurocognitive functioning is part of natural human variation- strengths based approach



It is normal to be different



Huge variety in how we think, learn, and relate to others.



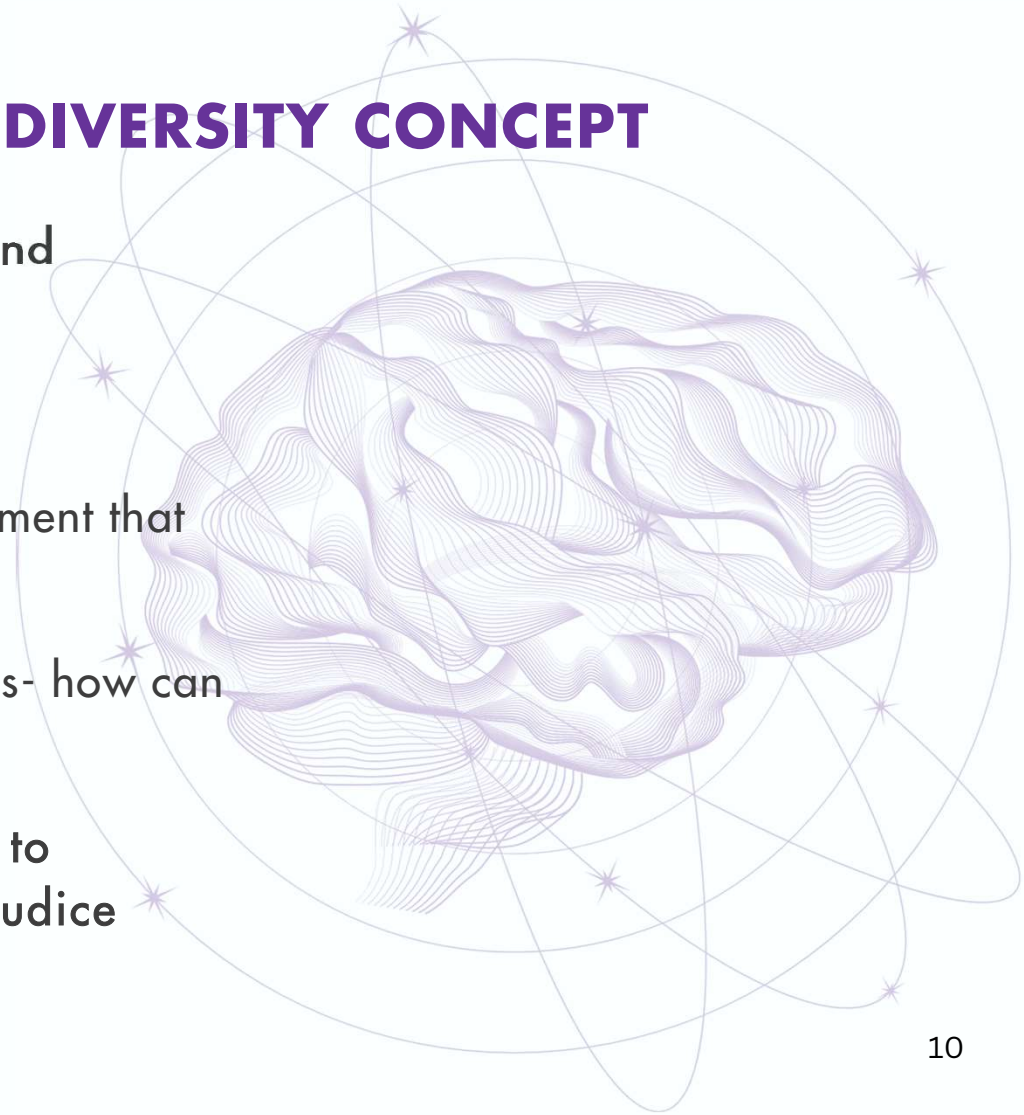
Need to recognize, anticipate, and accept this diversity

“Neurodiversity may be every bit as crucial for the human race as biodiversity is for life in general. Who can say what form of wiring will be best at any given moment?”  
(Blume 1998)



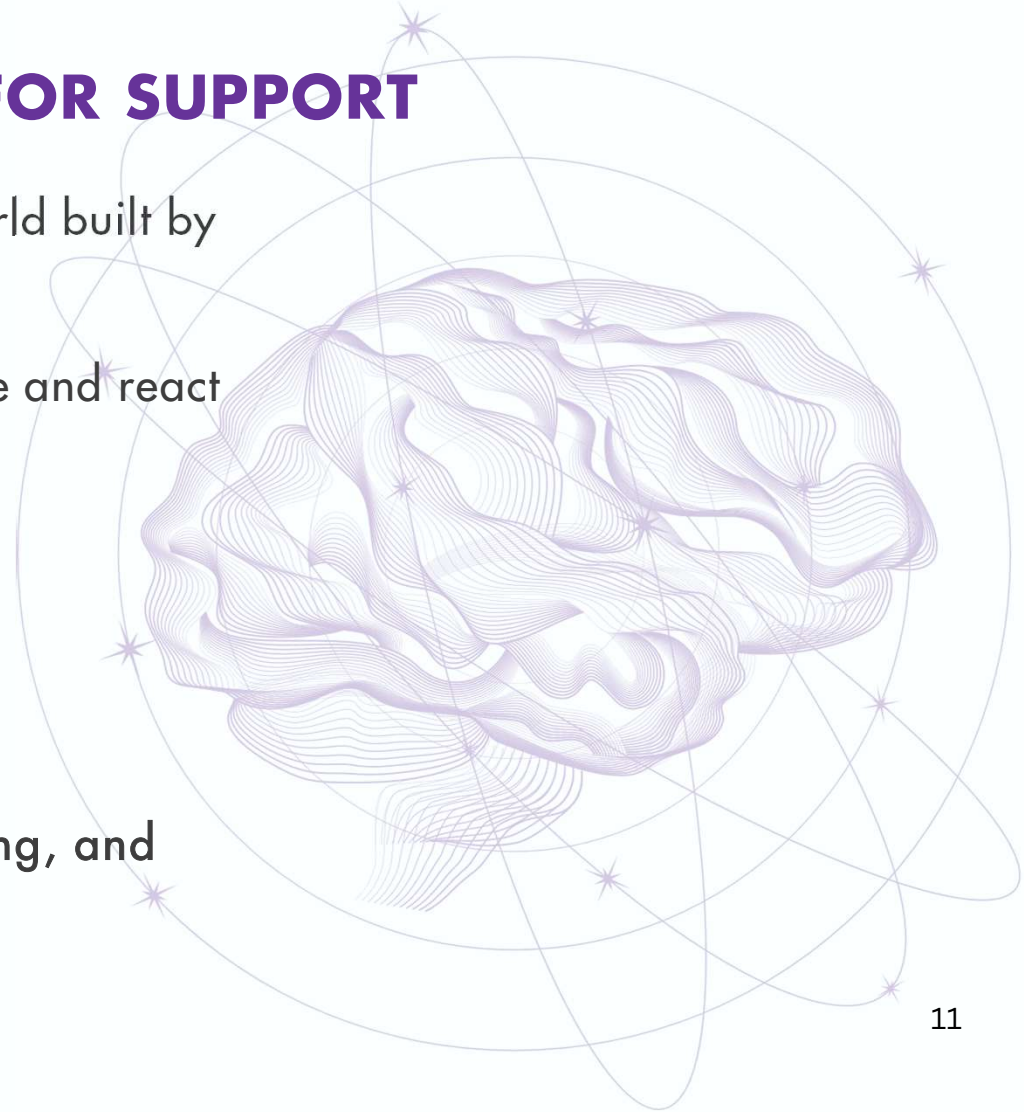
## ADVANTAGES OF THE NEURODIVERSITY CONCEPT

- Other forms of diversity are accepted and embraced, why not neurodiversity?
- 'Normal' is a social construct.
- Brings attention to changes in the environment that can benefit all.
- Growing number of people with diagnoses- how can they all be 'disordered'?
- Labelling as disabled/disordered leads to marginalization, stereotyping, and prejudice



## DOESN'T NEGATE THE NEED FOR SUPPORT

- Neurodiverse individuals still live in a world built by neurotypical people.
- Expectation on how people should behave and react are based on neurotypical behaviours
- Feeling different can be isolating
- Many neurodiverse people feel shame or embarrassment
- There still is marginalization, stereotyping, and prejudice



## **DIAGNOSES THAT NEURODIVERGENT FOLKS MAY (OR MAY NOT) HAVE:**

### **DYSLEXIA**

- Most common Learning Disability (7-10%)
- Affects skills involved in accurate and fluent reading and spelling
  - Impacted by phonological awareness, verbal memory and verbal processing speed

Dyslexia in young children can present as early as preschool, with signs like delayed speech, difficulty with rhymes and sounds, and struggles with learning letters, numbers, and colors.



## **DIAGNOSES THAT NEURODIVERGENT FOLKS MAY (OR MAY NOT) HAVE:**

### **AUTISM**

- 1-2% of the general population.
- Impacts how a person perceives and socializes with others, causing problems in social interaction and communication.
- Also includes limited and repetitive patterns of behaviour.
- Spectrum of severity
- Early signs of autism in young children can vary, but common indicators include delayed language development, difficulty with social interaction (like making eye contact or responding to their name), and repetitive behaviors.

## DIAGNOSES THAT NEURODIVERGENT FOLKS MAY (OR MAY NOT) HAVE:

### OTHER LEARNING

### DISABILITIES

- Dyspraxia (5-6%)
  - Challenges with fine and/or gross motor skills
- Dyscalculia (5-10%)
  - Challenges with math, time, direction etc.
- Dysgraphia (5-10%)
  - Challenges with handwriting and getting thoughts down on paper.

# DIAGNOSES THAT NEURODIVERGENT FOLKS MAY (OR MAY NOT) HAVE:

## ADHD

- 4-5% of the general population
- Highly hereditary – comparable to heritability of height 75% (CADDAC)
- There are three types of ADHD
  - Hyperactive
  - Inattentive
  - Combined (most common)
- Is not an inability to focus - is an inability to control focus
- Often treated as a 'behaviour'

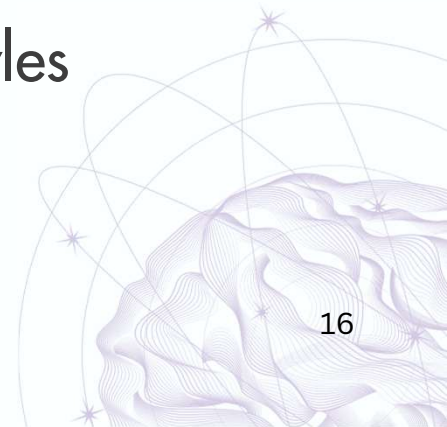
Symptoms of ADHD

Symptom	How a child with this symptom may behave
Inattention	Often has a hard time paying attention, daydreams
	Often does not seem to listen
	Is easily distracted from work or play
	Often does not seem to care about details, makes careless mistakes
	Frequently does not follow through on instructions or finish tasks
	Is disorganized
	Frequently loses a lot of important things
	Often forgets things
Hyperactivity	Frequently avoids doing things that require ongoing mental effort
	Is in constant motion, as if "driven by a motor"
	Cannot stay seated
	Frequently squirms and fidgets
	Talks too much
	Often runs, jumps, and climbs when this is not permitted
Impulsivity	Cannot play quietly
	Frequently acts and speaks without thinking
	May run into the street without looking for traffic first
	Frequently has trouble taking turns
	Cannot wait for things
	Often calls out answers before the question is complete
	Frequently interrupts others

## DIAGNOSES THAT NEURODIVERGENT FOLKS MAY (OR MAY NOT) HAVE:



- Working memory
- Processing speed
- Executive Functioning Skills
- Communication Styles
- Low Self-Esteem



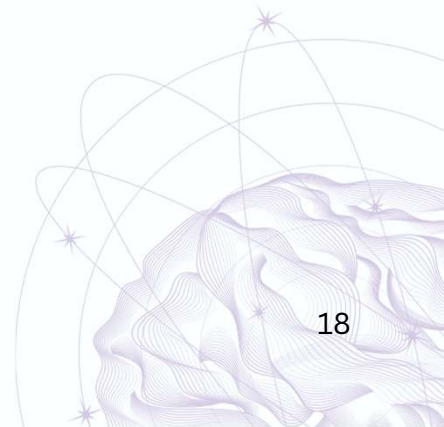
# **DIAGNOSES THAT NEURODIVERGENT FOLKS MAY (OR MAY NOT) HAVE:**

## **MENTAL HEALTH ISSUES**

- Highly correlated to neurodiversity
- Often one of the first signs
- Can be debilitating
- Stigma, shame, bullying, lack of success, lack of social networks and social skills, similar neurobiological processes

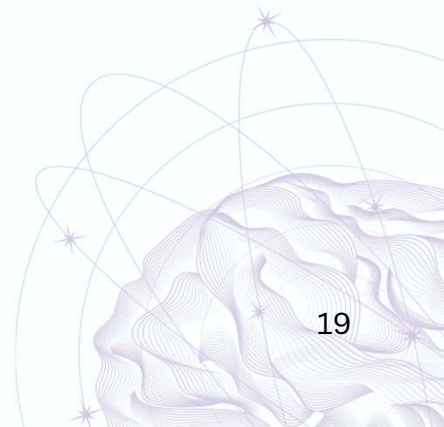
## COMMON NEEDS ACROSS MENTAL HEALTH AND NEURODIVERISTY

- How situations are perceived
- To understand expectations and have information ahead of time
- Processing time
- Information provided in multiple ways
- Clear boundaries



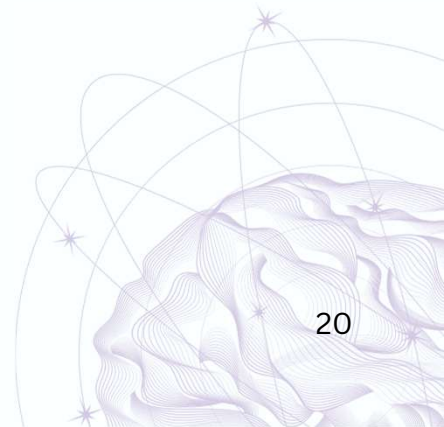
## **ACTIVITY: WHAT ARE THE RULES**

I want each group to come up with 5 rules for participating in this workshop



## **ACTIVITY: WHAT ARE THE RULES**

Now in a different colour I want you to state how you knew that was a rule





# Universal Design

## Universal Design

“Accessibility is a compensatory strategy conceived to prevent discrimination while universal design seeks to change the consciousness of those who create the built environment to address a broader conception of the human body.”

# Universal Design

When we create spaces that work for neurodiverse individuals, we create spaces that work better for neurotypical people as well.

Belonging is central to being able to meet the needs of the community. Our children need to feel like we considered their needs and that we are willing to meet them. Otherwise, they feel like they are behind a barrier.

# Universal Design

This means you don't need to know a diagnosis to support.

By creating spaces, policies, procedures that work for everyone we don't need to collect information that can be hard to obtain.

Also, we know that often those with intersectional identities are less likely to have a diagnosis but still deserve and require support.

Young children can show signs of neurodiversity and be neurodiverse but are not old enough for a diagnosis.

# Universal Design: Three Pillars

Explicit, Predictable, and Consistent

# Universal Design

## Explicit

Is everything a child and their parent needs to know clearly explained?

Are there any assumptions about their understanding that have not been addressed? Does the child know what the instruction means?

Is it explicitly stated where parents can find additional information and where children should go when they need support?

# Universal Design: Environment

## Explicit Expectations

1. Are visible schedules clear? This is helpful for almost all ages!
2. Have you gone over the to dos and not to dos versus rules
3. Do they know what they should do if they're struggling in the space?

# Universal Design

## Predictable

Do parents and children know what to expect when they come?

How do you handle things when they can't go as planned?

Is every session so different from one another that children are always having to learn new "rules?"



# Universal Design: Environment

## Predictability

- 1.Does the child know where they are supposed to be?
- 2.Do they know where they are going after a transition?
- 3.Do they know what is going to happen during the session?

# Universal Design

## Consistent

Are you following what you have said?

Are you following your policies or are you making on the fly policy changes? Why Matters At All Ages

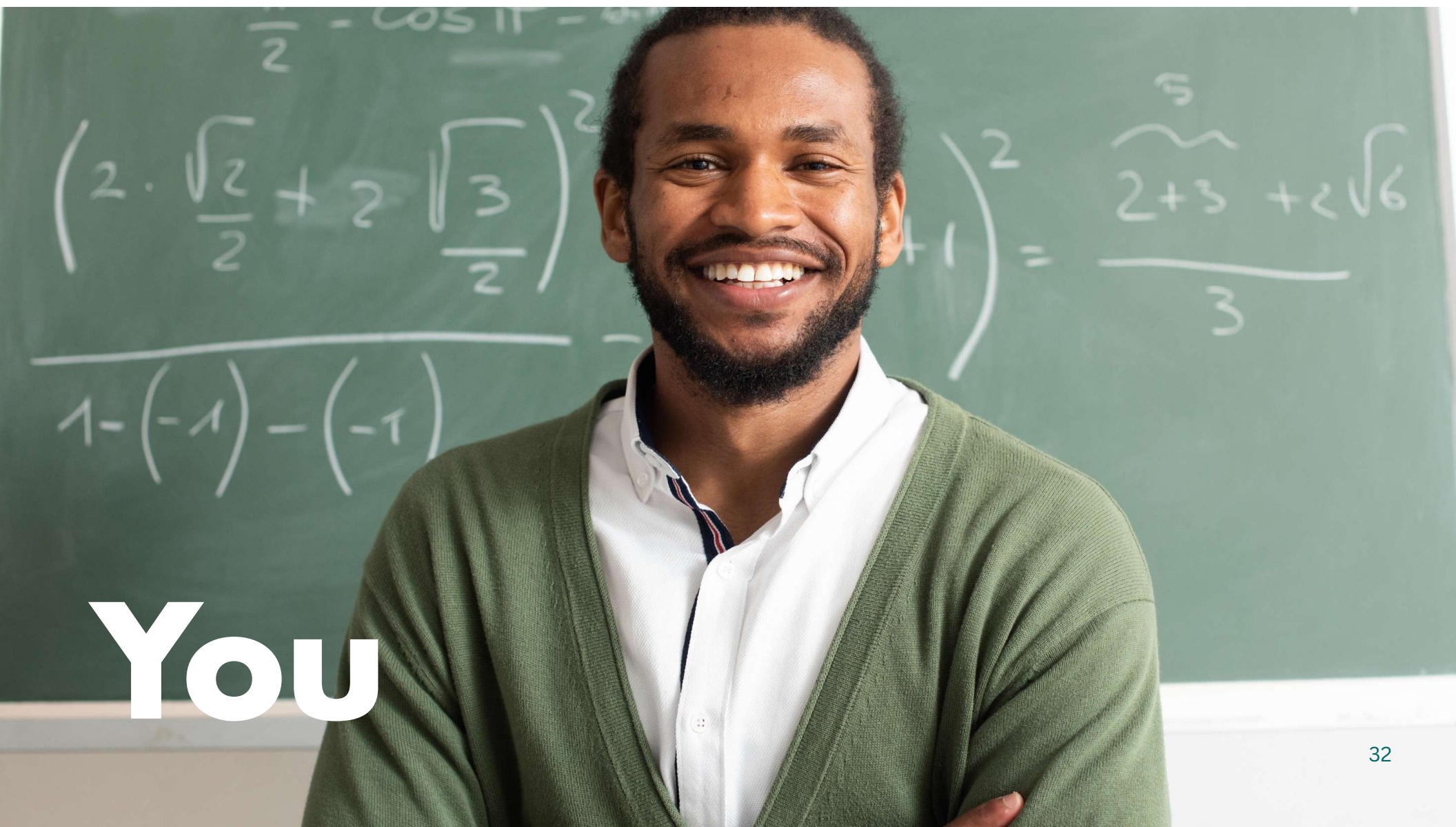
Are your problem-solving and decision-making processes carried out in a consistent manner to ensure that children can understand and appreciate any changes?

# Universal Design: Environment

## Consistent

1. Is the set up consistent?
2. Are items where they are supposed to be?

Also note: changes in the space are felt differently by neurodiverse children. Don't make major changes to the room without them. Have them be a part of the process.



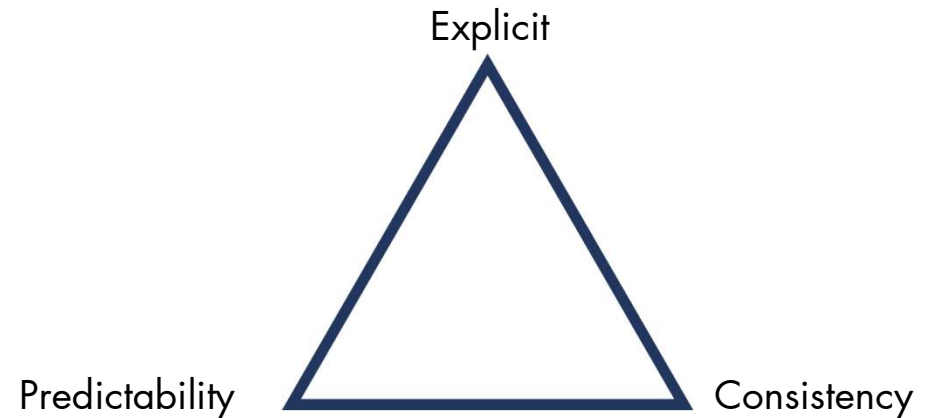
You

# **Universal Design: Child Care Professionals**

**“Almost everything will work again if you unplug it  
for a few minutes, including you.”**

**Anne Lamott**

# Universal Design: Child Care Professionals



Your emotional experience will have the biggest impact on the emotions of your children.

If you are dysregulated, they will be dysregulated.

You cannot be predictable and consistent if your feelings are out of kilter.

# Universal Design: Child Care Professionals

## Consistent

Non-coercive behaviour management strategies are based on you being consistent.

- You are not making minute to minute choices on how to handle unproductive behaviour. The children should already know. You EXPLICITLY go over the consequences.

# Universal Design: Child Care

## Consistent Professionals

† Your children shouldn't feel like you're punishing them. There has to be an agreement and rules for breaking the agreement.

- Without being punitive, you can cue your children to the correct behaviour. "I hope you follow our to do agreement to do x because I don't want you to have x consequence."
- We don't emotionally react to the choices our children make but embrace them.
- For young children these conversations may have to happen after a situation is de-escalated.



# Universal Design: Child Care Professionals

But not all child behaviour is a choice

- Our expectations should be reasonable to what the child can do. If there is behaviour they truly can't choose, we should modify the expectations for that child.
- Remind ourselves of age appropriate requests/behaviour

For example, if you have a child who struggles to stay seated because of a lack of impulse control, the modification, instead of a consequence, would be a cue to help them return to their seat.

# Universal Design

But **all** child care professionals behaviour is a choice

It is our job to respond unemotionally/ neutrally to unproductive behaviour. We need to accept that sometimes, children will choose to behave unproductively and not allow it to affect us.

# Universal Design: Child Care Professionals

## Reflection as consequence

As child care professionals we often do the child for the children. We tell them what was wrong, why it was wrong and what they need to do. To be consistent and disengaged from their choice, we have them reflect on it. We know as soon as age 2, children can successfully reflect on their behaviour but they may need prompting to make the right conclusions.

# Universal Design: Child Care Professionals

Reflection as consequence (for children or parents who have broken important rules)

Have children answer the following questions

- 1) So What Happened?
- 2) So What Did You Do?
- 3) How Were You Feeling Inside?
- 4) What's Next? (What is the consequence, and what could they have done differently?)

# Universal Design: Child Care Professionals

Reflection as consequence: As child care professionals we should reflect too.

- 1) So What Happened?
- 2) So What Did You Do?
- 3) How Were You Feeling Inside?
- 4) What's Next? (What is the consequence, and what could you have done differently?)

# Universal Design:

## Predicatable

- You can reduce unproductive behaviours by being predictable.
- Children may try to use unproductive behaviours to get a reaction from you.
- However, if your reaction is the same each and every time, we show children that being productive is the best way to get attention.

When children display unproductive behaviour, we need to help them get back on track. Saying “sit down” isn’t going to do it.

# Universal Design:

## Predicatable

A predictable set of questions helps redirect behaviour.

- 1) You're raising your voice with me, are you intending to do so?
- 2) You're saying you're really upset and I understand that. Can you take a breath?
- 3a) (if the child responds to the cue) Thank you.
- 3b) if the child doesn't respond to the cue. How can I help you do what you need to do?

# Universal Design:

## Predicatable

4a) If they still don't respond, unemotionally, ask, "What is the consequence for continuing to be disrespectful?" Once they answer, "Are you choosing that consequence?"

4b) Unemotionally provide the consequence.



A photograph of two women in a professional setting. On the left, a woman with short grey hair and glasses, wearing a white button-down shirt, is seated at a white table and looking towards the right. On the right, a woman with long blonde hair, also in a white shirt, is leaning over the table, holding a green pencil and looking down at papers. The background is a modern office with large windows. A semi-transparent purple overlay covers the right side of the image, where the title text is placed.

# Actionable Steps: General Guidelines

# General Guidelines

## Factors to Consider

- Don't assume ability or lack of ability. Make sure that people can self-accommodate as much as possible. Allow agency in how much support someone receives.
- Allow processing time. There are so many neurological, mental health and learning conditions where processing time is key for success.
- Materials need to be in accessible formats. Instructions should be given in multiple ways.

# General Guidelines

## Factors to Consider

- Meet the needs that you are witnessing.
  - Do you have a children that is always late? Work together WITH them to create strategies to help them succeed.
  - Is someone really shy and doesn't like to share? Work WITH them to find ways of participating.
- THEN, offer these strategies to everyone going forward. If one person has a need, it is likely that other people have the same need and may not express it.

# General Guidelines

## Factors to Consider

- Recognize and respect that there are many ways to communicate, and that your approach is not inherently superior to anyone else's.
- Allow accommodations before people "fail".
- Observe signs of frustration and provide support.



# Instruction

## Universal Design: Giving Instruction

If you want to be successful, you need consistency and if you don't have it, you've got no chance.

# Universal Design: Giving Instruction

## Actively Listening

For neurodiverse children active listening must be explicitly taught and practiced

Before giving instructions, I want to make sure that children are in the right frame of mind to hear me.

1. "Get ready" When I ask children to do this, I'm getting them into a comfortable position before I begin.
2. Take 5 deep breaths. children who struggle often have a lot of anxiety before a new activity.
3. Use visual cues and gestures to help
4. Ensure that they have access to written instructions.

# Universal Design: Giving Instruction

## Actively Listening

For neurodiverse children active listening must be explicitly taught and practiced

Ask children to clarify what they've heard



# Universal Design: Ways to Participate

Implementing UDL requires us to unlearn many beliefs, assumptions, and teaching practices that no longer work.

- Unlearning: Changing your Beliefs and Your Classroom with UDL

# Universal Design: Choice For All

## Engaging with our Programs

Imagine if you had to do the thing you hated most in the world to access the support and community you needed. Imagine being afraid to be asked to do things that were hard for you in front of complete strangers. Imagine having to ask for an accommodation that makes you stand out and distances you from other children.

# Universal Design: Choice For All

## Questions to Consider

1. Are children told what they will be expected to do ahead of time so that they can communicate their level of comfort?
2. Is peer pressuring causing children to do things that they don't feel comfortable doing? Did you provide alternative ways to participate?
3. Would you know (and if so how) that what you were asking was making people feel uncomfortable? Would they know how to let you know?
4. Are there intellectual/skill-based barriers to participating? Is there a way to eliminate them or provide support?

# Universal Design: Off Ramps

## Accommodate Ice Breakers

As a group take your ice breaker and think of ways you could accommodate this activity so it is neurodiverse friendly.

# Helping children Communicate & Regulate



## Helping

Are you promoting negative/unproductive behaviours?

We don't want to reward negative/unproductive behaviour, but often, as Child Care Professionalss, we do.

## Helping

How can children respond to their own feelings, if you don't know how you feel?

We can reduce unproductive choices by helping children identify their feelings and what to do with them.

Strategy 1: Start the day by sharing your feelings. Encourage children to share their feelings.

## Helping

How can you respond to your own feelings, if you don't know how you feel?

We can reduce unproductive choices by helping children identify their feelings and what to do with them.

Strategy 2: Share your observations and some strategies that might help (Positive emotions, too).



## Helping

How can you respond to your own feelings, if you don't know how you feel?

We can reduce unproductive choices by helping children identify their feelings and what to do with them.

Strategy 3: Empower children to support each other.

Often, children are better at identifying others' feelings.

## Helping

How can you respond to your own feelings, if you don't know how you feel?

You should be attuned to how your children are feeling. Get ahead of their feelings.

# Confronting Beliefs



# Confronting Beliefs

Ensure that you can have open and honest conversations about Ableism

Ableism is the discrimination of and social prejudice against people with disabilities based on the belief that typical abilities are superior. At its heart, ableism is rooted in the assumption that disabled people require 'fixing' and defines people by their disability. Like racism and sexism, ableism classifies entire groups of people as 'less than,' and includes harmful stereotypes, misconceptions, and generalizations of people with disabilities.

## Confronting Beliefs

Make time for staff to work together to share ideas, experiences and ways that helped them support the community

Creating inclusive spaces requires sharing knowledge and experiences. Learning from one person's needs to develop policies, procedures, and practices that benefit many is essential. This creates a healthy environment where we can learn from our children and honour their experience.

# Confronting Beliefs

Allow for mistakes to happen and provide grace

No matter someone's commitment to UDL and their desire to make an inclusive space, they can still do things that may alienate a children or create barriers. Staff need to know that they are allowed to learn from the experience without the fear of judgment.





# Agency and Voice

# Agency and Voice

Including neurodiverse voices in the planning process helps make a more inclusive environment.

Creating explicit ways for children to provide feedback also helps.

Programming is not just provided to the children, it is created WITH the children.

Create various ways for children to share from their experience (not just surveys and focus groups at the end).



## **Agency and Voice**

Incorporate their feedback. children need to feel that their voices are heard and respected.