Critical Incidents

DISABILITY

[English]

2013

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### Quick summary of critical incidents related to DISABILITY

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### CRITICAL INCIDENT: “ICEBREAKING”

Collected by CESIE, Italy, 2012

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<th>Gender edu</th>
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<th>General intercultural edu</th>
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**Sensitive zone**
What do you think are the “sensitive zones” that are the key issues of this critical incident?
Disability, education, artistic expression, verbal and non-verbal communication

**Culture of the person experiencing the shock**
What are the cultural reference frames of the narrator of the shock that may have played in the shock experience?
Sicilian / Female / Woman / Age 31 / Married / Heterosexual / Studies in theatrical disciplines / artistic theatre subculture.

**Culture of the person “causing” the shock**
What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience?
Sicilian / Female / young adult / living with a disability / wheelchair driver.

**Describing the SITUATION**

In 2008 I taught theatre in a workshop for adults in Palermo. During the first lesson I met my students, among them there was Francesca, a woman in a wheelchair. I prepared various ice breaking and team building activities but at the beginning of the lesson I got into a panic because all the activities that I had prepared were in a standing position and Francesca would not be able to participate. The following lessons were terrible because I only gave my students activities in which they had to sit in order to let Francesca participate in the activities. I didn’t understand that this methodology caused discomfort in all participants and in particular in Francesca. I was convinced that remaining seated was the only solution to work together but I didn’t understand that I was emphasizing Francesca’s disability and I was creating a barrier in the creation of the team. Speaking to my colleagues, they helped me to understand that the problem was my
perception of the disability.

1. Elements of the SITUATION

The critical incident occurred in 2008 in Palermo during a theatre lesson I was teaching adults. The protagonists were myself as the trainer, Francesca that brought in her wheelchair and the rest of the group they were indirectly involved in the situation. It was the first encounter for the whole group. I was not prepared and my proposed activities had not been thought through for the attendance of a differently abled participant, that I was honestly not expecting.

2. EMOTIONAL REACTION

I felt uncomfortable – uncomfortable for not having thought of the possibility of attendance from a person living with disability. And I felt even more frustrated by seeing that my second attempt, of doing only seated exercise, was even a bigger flop given that the whole group was subject to my lack of experience with the specific target group. Later on I felt motivated to re-skill my pedagogical competences and to update and enrich my repertoire of activities with exercises that respect all kinds of bodies. Towards the end of the several months lasting workshop I felt empowered and more confident to ask the person about his/her needs on regards of activities, what the person can and can’t do. Relieved!

3. What norms / values / representations did the incident touch / threaten / question in the narrator?

I was struggling with my idea of verbal and non-verbal communication – I thought it was disrespectful to ask verbally what she could or couldn’t do, in terms of movement and participation. It also questioned my idea of social composition in society, I mean – The idea of having a disabled person in my class never crossed my mind. I wrongly thought they didn’t participate in theatre.

4. Based on the analysis of question 3 what image do you have of the other person?

I had a very positive image of Francesca – she is full of life even though she is in a wheelchair. I also found her very courageous and determined in her wish to be part of a group and to express herself through theatre.

5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience?

Francesca is used to this kind of situation where people don’t expect her to be present and participative. Belonging to the subculture of disabled people, to her it was not shocking that I was not “prepared” for her presence in the group. To have a collaborative approach to all situations in life for her is a norm – she helps the able-bodied, like me, to feel comfortable in asking to what extent she can participate without feeling we are not politically correct or lacking respect. Francesca thinks it’s more respectful to ask then to just assume that she would like that everybody has to adapt to her. She also wants to adapt to others. She looks at it from situation to situation, it depends what is possible. But talking about it verbally, is the most important thing. Talking with her AND with the other participants.

6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?

Surely yes, I was so focused on Francesca that I was not really professional in her regards nor towards other participants. I have to see people living whit a disability like others, but also highlight the difficulties AND strengths of having them in a workshop. It’s not working to just ignore or find solutions yourself. I have to communicate these issues with the participants. Don’t see myself as the only professional, because sometimes other people know more what to do/say in some situations/about some subjects.
**CRITICAL INCIDENT: “NEW YEARS SPEECH”**

Collected by KVG, Belgium in 2012

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<th>General intercultural edu</th>
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**Sensitive zone**
What do you think are the “sensitive zones” that are the key issues of this critical incident? (eg: sexuality, gender relations, aging, conceptions of the body, non-verbal communication, Disability, conception of body)

**Culture of the person experiencing the shock**
What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Middle aged female, no disability, educator, Belgian, catholic

**Culture of the person “causing” the shock**
What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Woman, around 30 years old, with physical disability on her face, Belgian

**Describing the SITUATION**
We have an annual New Year’s reception at work. We asked someone of the Association of Equal Opportunities to give a talk. We’d frequently spoken on the phone and e-mailed, but then the woman came to the reception. Her face was mutilated. I hadn’t thought this when I heard her on the phone. I’d had a different image of the woman.

1. **Elements of the SITUATION**
There were around 15 people, most of them were volunteers (around 7). The other ones were professionals of our organisation or people of another organisation were we work with. And then there was the woman from the council.

It was a reception at our working place. A place with 5 desks with computers, a kitchen and a little garden. We all know each other, except for the woman from the council that we invited.

2. **EMOTIONAL REACTION**
My very reaction was that I jumped. I hadn’t expected this. Afterwards I was ashamed of this reaction. That I, as an employee at an organisation for people with a handicap, respond in this way. The voice had given me a totally different physical image of the woman.

3. **What norms / values / representations did the incident touch / threaten / question in you?**
This made me realise that meeting someone with a disability at the most unexpected moments isn’t normality yet. Perhaps the image that people with a disability need to be helped by us and that they don’t often practise these types of professions.

**Importance of the face:**
In individualist societies (such as contemporary Belgium) the face has a great importance. It is meant to express our individuality, our uniqueness, reflect our personality and character. Scars, wounds, mutilation of the face can distort the image that other people form of us more than other body part for this relative importance of the face. Our representation of beauty creates the expectations towards symmetry,
smoothness, harmony of shapes, in contemporary society also the freshness and youth of the face. In western cultures during interaction we usually look into the face of the other. Interacting with someone who has distortions, mutilation on the face is often a particular experience that teaches to look behind the scar, the mutilation to find the person. For the same reason there is an absence of contact with people whose faces are altered are different from the average. In particular there is a lack of representation of such people in the role of public speakers.

**Implicit attitudes:**
Everybody holds certain cultural beliefs and prototypical images of people that we interact with. Since probably most of us do not have contact with impaired people on a daily basis the image of them does not often comes to our mind when we first think of somebody whom we have not met yet. Even though the narrator works with impaired people that does not necessarily mean that she overcame the feelings of surprise when seeing another person with disability. She might not have been used to seeing them outside professional context, as even nowadays they are still marginalised. One can easily forget that disabled people do not exist in isolation.

4. **Based on the analysis of question 3 what image do you have of the other person?**
A normal, positive view of the woman. She was extremely pleasant and friendly.

5. **What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience?** *(Hypothesis!)*

**Fight against discrimination, full inclusion:**
As a member of the Association of Equal Opportunities, the woman in the incident probably has a strong sense of mission toward the promotion of equal rights and opportunities, probably referring to a variety of minorities, people with disability included.

**Empowerment to full participation:**
In accordance with her mission she may consider it important to empower people with particular identities, as well as people with disability. She may feel it important to give an example to go against the stereotypes and show that people who have mutilations on their faces can be just as competent as others.

6. **Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?**

“There is still an image of people with a disability as being ‘helpless’, not independent. There should be more of a focus on the capacities of this target group, instead of always concentrating on their limitations.” Although according to a Social Attitudes Survey 2009 published by the British Office of Disability people nowadays more likely think of disabled people as the same as everybody else (85 per cent compared with 77 per cent in 2005) there is still a belief that prejudice towards disabled people is widespread. Almost 8 out of 10 respondents felt that there is either a lot or a little prejudice towards disabled people. The reason for these judgements might be that people with impairments may look or behave differently from other people. Although everyone looks different, most cultures have a model of ‘normal’ appearance and behaviour, reinforced through images in art and the media, and this can create unease when interacting with people who are different from this ‘normal’ model. Although the narrator was used to having contact with impaired people she still experienced a shock when the person with whom she had the conversation over the phone did not fit the image of the women that she created in her mind.
Critical incidents DISABILITY
www.bodyproject.eu

CRITICAL INCIDENT: Slap in the Face

Name of organisation: KVG
Country: Belgium
Date of recording the critical incident: 8/05/2012

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<th>General intercultural edu</th>
<th>Physical edu / sport</th>
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Sensitive zone: What do you think are the “sensitive zones” that are the key issues of this critical incident? (eg: sexuality, gender relations, aging, conceptions of the body, non-verbal communication, Disability, perception of disability, place of children in society, integrity of the body, non-verbal communication)

Culture of the person experiencing the shock: What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

- Man: middle aged, Belgian, no disability

Culture of the person “causing” the shock: What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

- Child with a mental disability and autism, Belgian, father of the child was with him, the child doesn’t have a lot of possibilities to have social contacts.

Describing the SITUATION
Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.

A friend of mine has a child with autism and a mental handicap. I know the child and his disability, but have never been confronted by it. During an outing at a playground, the child hit me in the face, for no reason. I was shocked and helpless!

1. Elements of the SITUATION
How many people were present? How many women / men? What did the space look like, how was it arranged? (sketch of the arrangement if relevant / possible). Who were the protagonists? Was there any history between them (personal or cultural)? Try to be as objective as possible.

- Relationship between the two groups (eg. Colonial history, majority – minority)

- There were a lot of children playing on the playground. I guess something like 20. Then there was me, my friend and some other parents.
- It was a playground outside.
- I don’t know the child, but heard about him. He also doesn’t know me.
- The child was coming back to his father and me. Before he was playing on the playground by himself, alone.
- He was happy, not mad, came back to us, I talked to him, asked him if it was nice on the playground and he was looking at me. Than he slapped me in the face.

2. EMOTIONAL REACTION
How did you feel in this situation?

- I was in shock, not angry. I didn’t quite know how to feel.
3. What norms / values / representations did the incident touch / threaten / question in you?

**Perception of disability** – each society has a certain attitude, level of acceptance towards people with disability. In Western societies like the Belgian, disability is rather accepted (the disabled can appear in public spaces, they have possibility to live a normal life etc.), but in reality, discrimination is an everyday issue, or the regard is often pitiful (especially towards children).

**Place of children in society** – children should be respectful towards the adults

**Integrity of the body** - non-verbal communication: a slap is an insult, especially without reason

4. Based on the analysis of question 3 what image do you have of the other person?

*e.g. positive, negative, neutral, bizarre etc.*

He doesn’t cause a negative image. He does need to learn not to hit others; that this is inappropriate.

5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience? *(Hypothesis!)*

He was probably thinking I was too close to him, physically.

He probably has a communication problem, meaning he has problems communicating what he is thinking or feeling.

6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?

There is a gap between theory and practice. Abnormal behaviour isn’t supported socially, also if the person has a handicap.

Professional workers should try to figure out a way for the child to communicate verbally.
Name of organisation: KVG
Country: Belgium
Date of recording the critical incident: 21/05/2012

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<td>What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)</td>
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Describing the SITUATION

Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.

In a local newspaper, a community worker was given a column and wrote an article called “The three Antwerp madmen of the Dageraadplaats”. Dageraadplaats is a place in Antwerp. There is nothing special about it.

This article was made of a description of the people the man met through his work.

One of those people that was included on the article was a boy participating in KVG, the Catholic Organisation of the Disabled. This boy had autism and a mental disability.

After the newspaper was published, the boy’s mother phoned us (KVG, I am a social worker working there and picked up the phone), she was in shock, her son was completely ridiculed in the article.

There was, for instance, written, how the boy walked with his head down, scared looking at somebody.

1. Elements of the SITUATION

How many people were present? How many women / men? What did the space look like, how was it arranged? (sketch of the arrangement if relevant / possible). Who were the protagonists? Was there any history between them (personal or cultural)? Try to be as objective as possible.

Relationship between the two groups (e.g. colonial history, majority – minority)

The context of the situation is a communication on the phone. A mother of a disabled boy is calling a social worker exercising in a program for disabled people where her son is attending.

The phone discussion is about a third protagonist, a community worker who had met the boy previously and wrote an article insulting for him. He is a friendly man but seems like writing really sensational to entertain his readers.
The mother of the boy is a nice social and happy woman and does not know this community worker who had written this article personally.

2. EMOTIONAL REACTION

How did you feel in this situation?

At first and after the call of the boy’s mother, the narrator was in shock. It was not possible for him that anyone could be able to write something insulting about a disabled person because it was a for the narrator a lack of respect. However, the narrator wanted to have external opinions to evaluate if his emotional reaction was justified. the others also found it scandalous.

3. What norms / values / representations did the incident touch / threaten / question in you?

Respect for people with a mental disability: As a worker in a centre for disabled people, the narrator is particularly aware about disability and disabled people. For him it cannot be seems as a subject of mockery. A disabled person is before everything else a human being and his vulnerability should not be used for entertaining. Moreover, the writer being a community worker, there is an assumption about what should be his competency. He should functions in accordance with the values and ethics of the profession. He should be educated about the respect and the protection about mental or physical disability.

4. Based on the analysis of question 3 what image do you have of the other person?

* e.g. postive, negative, neutral, bizarre etc.

The narrator has a negative image about the other person. No empathy, no knowledge of autism or handicaps, community workers are not writers, are not trained properly.

5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience?

*(Hypothesis 1)*

Writing funny articles is the most important aspect, sensation; he probably didn’t mean any harm. It is possible to laugh about everything: By his experience as a community worker he is legitimate to turn in derision disability. He might think that entertaining on the disability of someone will take the drama out of people’s perception on the subject.

6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?

Community workers need to be educated better. Not everyone can just become a community worker. Apart from training, empathy and sympathy are also important values.

**OTHER RELEVANT INFORMATION**

We tried to call the newspaper’s editor-in-chief, but found it hard to talk to him. We also suggested the community worker to join KVG activities. We sent a reaction to the article and wrote a letter to the community worker. The article was taken off the website and the mother wrote a reply that was also published.
Critical incident: Cooking

Name of organisation: KVG
Country: Belgium
Date of recording the critical incident: 21/05/2012

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Sensitive zone
What do you think are the “sensitive zones” that are the key issues of this critical incident? (eg: sexuality, gender relations, aging, conceptions of the body, non-verbal communication, disability)

Culture of the person experiencing the shock
What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)
Woman, middle aged, Belgian, social worker at KVG

Culture of the person “causing” the shock
What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)
Middle aged woman, physical disability, bit overweight

Describing the SITUATION
Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.

There was a person at our cookery workshop with a slight mental and physical disability. She is often lazy at the workshop and uses her physical disability (as a means of escaping work) to not have to help. At a certain moment I (the cookery workshop’s supervisor) was really sick of this and there was another similar situation; I told her to dry the dishes, but she said she had to go to the toilet. I told her she wasn’t allowed to, because she always needs to go to the toilet when she has to do something. The woman got very angry with me because I didn’t let her go to the WC. Her father was called in.

1. Elements of the SITUATION
How many people were present? How many women / men? What did the space look like, how was it arranged? (sketch of the arrangement if relevant / possible). Who were the protagonists? Was there any history between them (personal or cultural)? Try to be as objective as possible.
Relationship between the two groups (eg. colonial history, majority – minority)

We were with 8 people in the room. (The narrator) was the “teacher”, the others have a mental or physical disability. The room is a large kitchen in an institution, (quite big bigger than a normal kitchen at home). The woman is a difficult person who has not a lot of contact with the other participants. We all know each other for a few years. She seems to the teacher and other people to be difficult to handle – this is the narrators experience from various situations apparently.

2. EMOTIONAL REACTION
How did you feel in this situation?
The narrator feels anger and annoyance, because the woman she never helps and uses her disability as an excuse. Anger, annoyance.
Perhaps the narrator also feels a certain pressure, being forced to give orders of staying in the kitchen and
refusing the other woman of visiting the bathroom.

3. What norms / values / representations did the incident touch / threaten / question in you?

As all humans, people with disability are able to perform activities.

According to a Calvinistic-protestant norm, every person has to participate actively according to her level of capacity: if you want to enjoy, you must also provide.

Perhaps also: disabled people should not take improper advantage of their disability – especially not in environments, which are adapted to meet their disabilities.

4. Based on the analysis of question 3 what image do you have of the other person?

e.g. positive, negative, neutral, bizarre etc.

She is lazy and doesn’t want to learn to cook at all. She wants to belong to the group, but without having to do anything for it. She is acting in a “parasitic” way and thereby sort of utilizing her disability.

5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience?

(Hypothesis)

She wants to belong to the group, not be obliged to help, can’t help because of her handicap. Maybe she doesn’t want to help, is a sort of protest because she doesn’t like the workshop and she is obligated to come. Or maybe she doesn’t want to be forced to do things and is this her reaction to it. Maybe he is used to act inferior and helpless, and threat people her that way in a lot of situations.

6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?

People with a handicap are often still regarded as people who can’t be independent. This view has to change, as this will cause them to lose confidence and become passive. It is necessary to recognize people with a disability and motivate them to perform according to their level of competence.

People may desire people with a disability perform tasks they can handle. They shouldn’t feel pity and should empower the person with a handicap.
**CRITICAL INCIDENT: Shopping**

**Name of organisation:** KVG  
**Country:** Belgium  
**Date of recording the critical incident:** 21/05/2012

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**Sensitive zone**  
What do you think are the “sensitive zones” that are the key issues of this critical incident? (eg: sexuality, gender relations, aging, conceptions of the body, non-verbal communication,)

Disability, conceptions of body

**Culture of the person experiencing the shock**  
What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Middle aged woman, no disability, tall, Belgian, accountant

**Culture of the person “causing” the shock**  
What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Young guy, severe physical disability

**Describing the SITUATION**

*Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.*

I went shopping in a shopping centre. There was a child in a reclining wheelchair. He had a very severe physical disability. I found this very sad and watched him. But on the other hand, I also admired his parents to come outside with their child.

1. **Elements of the SITUATION**

How many people were present? How many women / men?  
What did the space look like, how was it arranged? (sketch of the arrangement if relevant / possible)  
Who were the protagonists? Was there any history between them (personal or cultural)? Try to be as objective as possible.  
Relationship between the two groups (eg. colonial history, majority – minority)

In the shopping centre were a lot of people. The space is a large floor with a lot of different shops. I didn’t know the person in the wheelchair or his parents.

2. **EMOTIONAL REACTION**

How did you feel in this situation?  
Shocked, I felt pity, but was also moved, felt empathy towards his parents.

3. **What norms / values / representations did the incident touch / threaten / question in you?**

Disability: the names are telling – “disability” or “handicap” refer to people who are defined by a lack of ability, a lack of completeness. The representation of people with disability traditionally implies a life that is not full, complete, an autonomy that is wounded.  
Taboo of disability: in most western societies handicap is traditionally surrounded by some sense of taboo. Meeting a person with disability unavoidably poses a kind of broken mirror: it reflects to us an image of our own vulnerability. Different societies have created different manners of avoiding such awkward sensations,
usually by refining people with disability to an invisible segregated space.

**Equality:** “Everyone should get opportunities, should be allowed to take part in society.”

**Integration:** in historical terms the recognition of the need to integrate people with disability is fairly recent. It is based on two ideas, the idea of equality and inclusion but also on the recognition that people with disability are valuable members of society who can also contribute.

4. Based on the analysis of question 3 what image do you have of the other person?

* e.g. positive, negative, neutral, bizarre etc.

They are not ashamed of their child and don’t regard coming outside as a burden. They make an effort to integrate their child in society.

5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience? (*Hypothesis I*)

There are people living with a disability in our world. So you also see the in daily life. They also go outside, shop, eat, drink… Sometimes it’s not looking totally “normal”, but what is a “normal” standard? Looking to them is ok, just like it’s ok to look at all people, but it’s the way of looking that sometimes is shocking.

Disabled people cannot be seen as inferior, strange or different.

It’s okay to feel empathy towards the child with a disability. But people should try to control their body language so the person with a handicap doesn’t get stigmatized over and over again by people that are shocked.

6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?

Others stared too, but no one did this in a negative way, more out of curiosity or approval. This is a good way of dealing with these types of situations. People with a disability are increasingly becoming part of the normal street scene, making it more familiar for those who otherwise don’t come into contact with this target group.

Historically, throughout different societies people with disabilities have been discriminated against. This has many times resulted in segregation, and also nowadays we often create conditions of ignorance and prejudice towards people with disabilities. This marginalisation then results in the under-representation of people with disabilities in our social life. The reason for woman’s surprise may be that she is not used to seeing disabled people in public. However the narrator found it positive that the parents tried to engage their child in daily activities and wished that they would be more represented in our society.

The narrator as well as other people who looked at the impaired child might possess certain culturally-based beliefs about the role and place of impaired people in society. The families and disabled individuals have to confront these beliefs on a daily basis. Nevertheless, they seemed to look at the parent’s effort and behavior with approval.

One should note that it is also important that community to include its disabled members in the full range of social, cultural, religious and civic activities, as well as in work and play. For people with impairment integration in daily life is very important as it allows development of self-esteem and a sense of belonging to a larger community beyond the world of disability.

In addition to this, it is also important to distinguish between feelings of pity and feelings of empathy.
Name of organisation: KVG  
Country: Belgium  
Date of recording the critical incident: 21/05/2012

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**Sensitive zone**
What do you think are the “sensitive zones” that are the key issues of this critical incident? (eg: sexuality, gender relations, aging, conceptions of the body, non-verbal communication, Disability. Lack of concern and empathy of other people’s needs. A way of being very selfcentered.

**Culture of the person experiencing the shock**
What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Female, 55 years old, Belgian, introvert, no disability

**Culture of the person “causing” the shock**
What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Woman, 70 years old, physical disability

**Describing the SITUATION**

*Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.*

My aunt has a physical disability and has one sister, my mother. My aunt lives alone. It was Christmas. My mother had worked very hard and was more focused on serving her guests than enjoying the party and the food. Eventually, my mother wanted to take the last piece of turkey during the party (when all the other family members had finished, and she didn’t yet had tasted the turkey herself). The aunt responded: Oh, I’d hoped to take it with me for tomorrow. Her parents also wanted the aunt to take this home, so she didn’t have to cook. So my mother didn’t get to eat it (didn’t have anything to eat).

1. **Elements of the SITUATION**

   *How many people were present? How many women / men?*
   
   *What did the space look like, how was it arranged? (sketch of the arrangement if relevant / possible)*
   
   *Who were the protagonists? Was there any history between them (personal or cultural)? Try to be as objective as possible.*
   
   *Relationship between the two groups (eg. colonial history, majority – minority)*
   
   It was a Christmas dinner. They were with 9 persons: grandparents, mother, aunt, narrator, husband and three children.
   
   They were at the house of her parents. It’s a nice, wide house. They were sitting in the dining room to eat. They all know each other very well and see each other at least once in a month.

2. **EMOTIONAL REACTION**

   *How did you feel in this situation?*
   
   The narrator felt indignant and a little angry.
The narrator also on behalf of her mother felt somewhat exploited of the rest of the family.

### 3. What norms / values / representations did the incident touch / threaten / question in you?

People with a disability can also do many things themselves and should not be considered as any less. As all humans, people with disability are able to perform adequate actions according to their level of performance. It is therefore fair to expect them to be social to a reasonable degree.

### 4. Based on the analysis of question 3 what image do you have of the other person?

*e.g. positive, negative, neutral, bizarre etc.*

The grandparents mean well, but give preferential treatment to the aunt and barely took notice of the efforts the mother made with the dinner. They feel sorry for their disabled daughter. But the aunt is taking advantage of this situation and this is not acceptable.

### 5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience? *(Hypothesis 1)*

People with a disability have more rights. They have so much bad luck already, so we should spoil them in areas they can still enjoy...

People with disability may develop a self-conception as victims, which make them expect special care.

This may also be a case in a lot of other families where no members are disabled. The incident, thus, seems to reflects a more general “family issue”, where some family members have a role as the “providers”, and other family members play the role as the “recipients”. So, it also seems to be a question of balance and especially of lack of reciprocity in this family – like in many families. The disability of the aunt may just stress the lack of balance.

### 6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?

It should be clarified that people with a handicap have the same rights as others. Not more rights. A handicap may not be misused to get or achieve things. Neither should parents treat a child without a disability less than a child with a disability. They deserve the same amount of love and care.

Parents should also try to empower the child with a disability to take care of her own if she is able to.
# CRITICAL INCIDENT: Guilty

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## Sensitive zone
What do you think are the “sensitive zones” that are the key issues of this critical incident? (e.g. sexuality, gender relations, aging, conceptions of the body, non-verbal communication,

Disability

## Culture of the person experiencing the shock
What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Woman, middle aged, Belgian, no disability, social worker

## Culture of the person “causing” the shock
What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Man, middle aged, no disability, large

## Describing the SITUATION
Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.

During the annual action of our organisation we were putting flyers under windscreen wipers. We did this together with volunteers who sometimes also have a disability. A man came past and said to Marcel (one of our volunteers who has a physical disability): “You are to blame for everything.”

### 1. Elements of the SITUATION

**How many people were present?** How many women / men? What did the space look like, how was it arranged? (sketch of the arrangement if relevant / possible). **Who were the protagonists?** Was there any history between them (personal or cultural)? **Try to be as objective as possible.**

**Relationship between the two groups (e.g. colonial history, majority – minority)**

It was Marcel, the man, three other volunteers and a social worker. All volunteers (4) have a disability. Two physical, the other 2 a mental disability. They were in the city, in a street were there park and drive cars (busy street).

The people know each other quit well, but didn’t know the man who got mad.

Marcel reacted quite shocked and angry to the man, but with respect. He said that it is his rights, just like anybody else, to come outside and do his thing. And that the reaction of the man wouldn’t change anything to this. And then he went on putting flyers under the wipers.

### 2. EMOTIONAL REACTION

**How did you feel in this situation?**

Shocked, astonished.

### 3. What norms / values / representations did the incident touch / threaten / question in you?

People with a disability are equal.
**Integration** – people with a disability are like other people, so they also want to live in the society. Other people do have to welcome them, because in the past this group was excluded. Interaction and communication is here very important.

Possibly: **idea of mutual benefits**: not only disabled people benefit from cooperation but also non disabled

**Discrimination and negative representation** has to change: many people still have a negative prejudice against people with handicap

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<th>4. Based on the analysis of question 3 what image do you have of the other person?</th>
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The man who reacted this way had a very short-sighted and negative attitude. Perhaps he had a bad experience with someone with a handicap, but he shouldn’t generalise. The man was rude and frustrated because he’s blaming problems on a person he doesn’t even know.

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<th>5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience? (Hypothesis !)</th>
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| People with a disability require more care, so more money and that is my money.  
**Negative reception of impaired people**  
Although according to a Social Attitudes Survey (2009) published by the British Office of Disability Issues image of disabled people in society is improving , they are still many times seen as less productive by non-disabled people (Three quarters of respondents of the survey thought of disabled people as needing to be cared for some or most of the time).  
**Blaming minorities for social / economic problems:**  
It might be possible that the response of the young man who gave a remark to a volunteer with disability was due to his feeling or distorted perception of impaired person as redundant in society (Note: According to the International Labour Organization, the level of unemployment worldwide is two or three times as high as for other people, and in many developed countries where unemployment is very widespread, the employment prospects for disabled people are minimal or non-existent. In countries with good social systems, which Belgium is, that might mean that the majority pays for the impaired people, who might cause resentment and hostile attitudes towards impaired). |

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<th>6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?</th>
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| It’s very good that Marcel reacted himself and opposed what the man said. But the professional should have perhaps responded as well and he should have asked why he’s blaming the person with a disability. Through conversation he should try to get the man to have a different view of the target group.  
**Projection**  
It might be also possible that the man’s remark had nothing to do with the volunteers’ impairment. In this case the narrator made an automatic assumption that man’s remark was due to volunteers’ disability and not some other aspect of his behaviour. |
### Critical Incident: Restaurant

**Name of organisation:** KVG  
**Country:** Belgium  
**Date of recording the critical incident:** 25/05/2012

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**Sensitive zone**: What do you think are the “sensitive zones” that are the key issues of this critical incident? (eg: sexuality, gender relations, aging, conceptions of the body, non-verbal communication, Disability

**Culture of the person experiencing the shock**: What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Social worker, female, 25 years old, Belgian, no disability

**Culture of the person “causing” the shock**: What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Older man, grey hair, no disability, Belgian

### Describing the SITUATION

*Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.*

I went for a meal with someone with a severe mental handicap. At a certain moment this person took chips from someone in the Lunch Garden. We didn’t know the man. The man was very surprised, but he wasn’t angry.

**1. Elements of the SITUATION**

*How many people were present? How many women / men?*  
*What did the space look like, how was it arranged? (sketch of the arrangement if relevant / possible)*  
*Who were the protagonists? Was there any history between them (personal or cultural)? Try to be as objective as possible.*  
*Relationship between the two groups (eg. colonial history, majority – minority)*

The restaurant where we were has a lot of places. There were around 60 people there. They were sitting at the table with just two, the man next to them was sitting at his table alone. He was around 60 years old. They don’t know him. The social worker knows the person with the disability good. They know each other for 6 years.

**2. EMOTIONAL REACTION**

*How did you feel in this situation?*  
It bothered her, vicarious shame.

**3. What norms / values / representations did the incident touch / threaten / question in the narrator?**

People with a handicap don’t have to stay indoors; they should be able to join society without being stared at. But not everyone wants this. And sometimes you (as an assistant, helper, parent, etc) need to stay in the
4. Based on the analysis of question 3 what image does the narrator have of the other person? 

*E.g. positive, negative, neutral, bizarre etc.*

It’s normal that the man reacted surprised and didn’t like this. He wasn’t angry, which could indicate that he understood the situation. Respect for the man and certainly no negative feelings towards him.

5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience? *(Hypothesis !)*

You don’t steal, you shouldn’t come too close. The person with a handicap can’t restrain himself. He was most likely hungry and acted on basic instincts or he simply wanted to eat chips without realising he could order some.

6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?

More attention should be paid to integration, especially for people with a severe mental disability. They should try to learn that it’s not acceptable to grab whatever they want. You can’t always get what you want.
**Critical incident: Toilet**

**Name of organisation:** KVG  
**Country:** Belgium  
**Date of recording the critical incident:** 25/05/2012

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**Sensitive zone**  
What do you think are the “sensitive zones” that are the key issues of this critical incident? (eg: sexuality, gender relations, aging, conceptions of the body, non-verbal communication,  
  Disability, sexuality)

**Culture of the person experiencing the shock**  
What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)  
Female, young (22 years old), Belgian, no disability

**Culture of the person “causing” the shock**  
What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)  
Man with moderate mental disability, 15 years old, Belgian

**Describing the SITUATION**  
Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.

In a scout-camp there was someone with a moderate mental disability. The man needed to go to the toilet and instead of doing this he took off his trousers on the spot and started to pee where he was standing. I tried to stop him.

1. **Elements of the SITUATION**
   - How many people were present? How many women / men?  
   - What did the space look like, how was it arranged? (sketch of the arrangement if relevant / possible)  
   - Who were the protagonists? Was there any history between them (personal or cultural)? Try to be as objective as possible.  
   - Relationship between the two groups (eg. colonial history, majority – minority)

They were at their place in their camp. It happened on a playground with grass.  
There were 9 people, 7 people with a mental disability and two helpers, all know each other for a few years. The people with a disability were adults. 3 of them were female, 4 were male. From the two helpers, one was a woman and one a man.

2. **EMOTIONAL REACTION**  
How did you feel in this situation?  
Indignant, in shock.

3. **What norms / values / representations did the incident touch / threaten / question in the narrator?**  
Privacy - especially in sexual hygiene - is important even when we talk about mentally disabled people.  
Respect – it’s not respectful to pee in public in the plain sight of others.

4. **Based on the analysis of question 3 what image does the narrator have of the other person?**  
e.g. positive, negative, neutral, bizarre etc.
The narrator found this dirty, but realised that the person didn’t mean any harm. That was the reason why the narrator finally was not angry or didn’t have a negative image of the man.

5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience?

*(Hypothesis!)*

Privacy isn’t important. Perhaps he doesn’t know any better. To him there isn’t really any privacy, as he is used to being cared for, washed, etc. For people who need a regular outer assistance to manage their most intimate bodily functions “privacy” does not have a special importance or meaning. Probably for that people – like many times for little children – there are no special meaning of the penis, of naked genitals, also.

6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?

People with a disability are sometimes so used to everyone doing everything for them, also helping with washing and basic needs. Assistance could focus more on privacy. The necessary attention could be paid to this during training. They also should try to learn some basic rules, if possible.
**Name of organisation:** KVG  
**Country:** Belgium  
**Date of recording the critical incident:** 25/05/2012

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**Sensitive zone**  
What do you think are the “sensitive zones” that are the key issues of this critical incident? (eg: sexuality, gender relations, aging, conceptions of the body, non-verbal communication,

Disability, sexuality, conception of body, gender relations

**Culture of the person experiencing the shock**  
What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Young woman (22 years old), doing educative studies, no disability, heterosexual

**Culture of the person “causing” the shock**  
What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Mental disability, young men (2) of 16 years old, sexual orientation not known, Belgian

### Describing the SITUATION

*Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.*

I caught two men with a moderate mental handicap in the same sleeping bag. They were touching each other. Other people were also in the tent.

1. **Elements of the SITUATION**

*How many people were present? How many women / men? What did the space look like, how was it arranged? (sketch of the arrangement if relevant / possible). Who were the protagonists? Was there any history between them (personal or cultural)? Try to be as objective as possible. Relationship between the two groups (eg. colonial history, majority – minority)*

There were 12 people in the room, but just two of them were awake. The supervisor came into the room alone. It was the tent on the camp.

All people know each other. The supervisor is the person who supports and organizes the camp for people living with a mental disability.

2. **EMOTIONAL REACTION**

*How did you feel in this situation?*

The attendance felt indignant and speechless. She was angry with these men because they didn’t take account of the rules and the other people who were present in the tent.

3. **What norms / values / representations did the incident touch / threaten / question in the narrator?**

Privacy, respect for the body, respect for others.

For the narrator it was a norm, that any kind of intimate body contact between two people is not allowed where there are also other people are in a room – and they don’t know about it. It was not because it were two men doing this, but overall that this happened between two people. These people don’t really even
know the consequences of this behaviour, because of their disability. And so it wasn’t respectful for themselves, their own body, the body of the other person and the other persons in the tent.

4. Based on the analysis of question 3 what image does the narrator have of the other person?  
  e.g. positive, negative, neutral, bizarre etc.
  They didn’t respect the rules and their mates.

5. What could be the norms/values/representations of the other person/culture that led to the specific behaviour that caused the shock experience?  
  (Hypothesis 1)
  No respect for one’s own body, privacy isn’t important.  
  They could feel a desire to be intimate with someone, like every human does.

6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?

Privacy and respect for the body are important matters where assistants or parents have a prioritising role in teaching this. Assistants need to focus on this, but they should also realise how necessary it is to inform the people they help of this.  
Besides this it does raise the question if two people with a mental disability should be allowed to be intimate with eachother (in private). This is a basic desire of a human. The question is however if they understand it and what consequences it might invoke.
CRITICAL INCIDENT: Party

Name of organisation: KVG
Country: Belgium
Date of recording the critical incident: 25/05/2012

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<tr>
<th>Professional domain of the narrator</th>
<th>Gender edu</th>
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Sensitive zone: What do you think are the “sensitive zones” that are the key issues of this critical incident? (e.g. sexuality, gender relations, aging, conceptions of the body, non-verbal communication, ...)
Conception of the body, disability

Culture of the person experiencing the shock: What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)
Young man (around 28 years old), Belgian, leader of a group, catholic, no disability

Culture of the person “causing” the shock: What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)
No disability, Slovakian, youngsters

Describing the SITUATION
Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.

I was a guide at a camp in Slovakia for people with a physical disability. On the final evening there was a party. The people who join the camp are mainly wheelchair users. When we were in the room with our guests Slovak students came to ask us if we could leave the club, because they wanted to dance and didn’t have any room because of the wheelchairs.

1. Elements of the SITUATION
How many people were present? How many women / men? What did the space look like, how was it arranged? (sketch of the arrangement if relevant / possible). Who were the protagonists? Was there any history between them (personal or cultural)? Try to be as objective as possible.
Relationship between the two groups (e.g. colonial history, majority – minority)

There were a lot of people. The Belgian group were with 9 persons: 3 helpers and 6 clients. On the party there were over 200 people.
It was in a place where there are given a lot of parties, something like a youth cafe. The Belgian group didn’t know the other people there, only their group. They also didn’t speak the language the Slovakians spoke.

2. EMOTIONAL REACTION
How did you feel in this situation?
The group leader was angry, furious.

3. What norms / values / representations did the incident touch / threaten / question in you?
Respect for others, equality of people. Everybody had the right to dance, to enjoy, to go out, also people in a wheelchair. The Belgian group was asked to leave the place, because the wheelchairs took too much space on the dancefloor. This causes an inequality. Because they take more space, they have to leave. This
is not correct. Discrimination. They believed they had more right to dance, enjoy and have fun than people in a wheelchair.

4. Based on the analysis of question 3 what image do you have of the other person?

   e.g. positive, negative, neutral, bizarre etc.

A very negative image of these youngsters. They had no respect at all and are shameless. They show no empathy towards the people in a wheelchair. They only think of themselves.

5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience? (Hypothesis 1)

Negative/passive representation of people with disability:
There is a form of prejudice in our society that surrounds disability, a discomfort, a subtle fear of that which is different and unfamiliar. It manifests as pity, avoidance or mockery, sometimes even ignorance. Naturally, many people, especially young people, tend to avoid those who make us feel uncomfortable or guilty. It seems that managers of the club did not know how to act or respond to the group of impaired people. Maybe this could be also due to the fact that we are not used to seeing them in a discotec, we do not think about the fact that they are also a part of our society, with the same needs for acceptance, party, playfullness as all others. This fact shows that there is still a big need for a lot of people in different countries to get to know the group of disabled people. So they get used to them and learn to respect them.

6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?

In society people with a handicap should fit in the normal street scene. Slovakia is a step behind Belgium in this regard, but there should also be respect for this target group. These youngsters should learn from the start to be respectful and not merely selfish. Bringing people with disabilities into real life may result in bigger acceptance and less prejudices from society. We should nurture inclusive attitudes and encourage their participation and integration in every aspects of our daily lives. The narrator expresses anger and dissatisfaction in this case the outcome of their attempt to bring disabled people to public space was not successful.

OTHER RELEVANT INFORMATION

We continued to party in the hall until the early hours. In the morning they asked us to clean up the hall. I then asked one of the camp people to say this isn’t possible, because we are disabled. We could have also discussed what we could do. But we never came back. If this would happen here at a youth club, we would of course have handled this differently.

One of the commonest responses to impairment is to perceive it as an unmitigated personal and social disaster or tragedy, a loss or deficiency (some countries define disabled people by percentages, i.e. one can be 50 per cent of a "normal" person). These powerful negatives elicit either fear, pity, or admiration, depending on how the disabled person "copes". The negative response of most non-disabled people to disabled people is based mainly on ignorance: they assume that disabement is a catastrophe, and they fear it; fear creates awkwardness, avoidance, and prejudice (Coleridge, 1993).
CRITICAL INCIDENT: Satisfaction

Name of organisation: KVG
Country: Belgium
Date of recording the critical incident: 19/03/2012

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**Sensitive zone**

What do you think are the “sensitive zones” that are the key issues of this critical incident? (eg: sexuality, gender relations, aging, conceptions of the body, non-verbal communication,)

Conception of body, sexuality, disability, gender relations

**Culture of the person experiencing the shock**

What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Young woman, Belgian, catholic, heterosexual, no disability, open-minded

**Culture of the person “causing” the shock**

What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Mother of a son living with severe physical disability, middle aged, catholic, open-minded, Belgian

**Describing the SITUATION**

*Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.*

I’m at a course concerning handicap and sexuality. There is a mother of a boy of 28 years old with a severe physical disability. They live together with the father and the two brothers. The mother says that her son a few years ago had a need to be sexually satisfied. They invited several people offering sexual assistance, specifically people with a disability. But the boy never felt at ease, because he didn’t know those women. They decided, after a consultation with the whole family (the family who lives together – so the brothers and the father), that the mother would carry out this task (hand job) and thus sexuality satisfy her son.

1. **Elements of the SITUATION**

   *How many people were present? How many women / men? What did the space look like, how was it arranged? (sketch of the arrangement if relevant / possible). Who were the protagonists? Was there any history between them (personal or cultural)? Try to be as objective as possible.*

   **Relationship between the two groups (eg. colonial history, majority – minority)**

We were with more than 200 people listening to the woman who told the story about her son. All of the participants were professionals. I just knew my colleague who was also there. I didn’t know the mother. She told the story in a large auditorium. She was sitting in front. It was a learning course for professionals. The audience didn’t know the woman in front, they just listened to the testimony. It was the start of the day, after this testimony, the audience was divided in groups to discuss and learn more about sexuality and disability. The audience didn’t have to give a solution or their meaning. They could ask questions to the mother, what happened. One of the questions was how she feels by giving the hand job to her son and what she thinks about these questions in institutions – if this kind of service is a part of the job of people who work in institutions.
2. EMOTIONAL REACTION

*How did you feel in this situation?*

Surprised, uncomfortable.

3. What norms / values / representations did the incident touch / threaten / question in the narrator?

Respect and integrity of the body. Boundaries of assistance.

4. Based on the analysis of question 3 what image does the narrator have of the other person?

*e.g. positive, negative, neutral, bizarre etc.*

The mother wants to help her son no matter what, which one can only respect. The question here is whether this is a correct way of acting, even if the son also wants this and the rest of the family agree. The mother doesn’t cause a negative image, but it’s hard to accept.

5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience? *(Hypothesis !)*

Empathy, respect for the needs of the other. Sexuality is subordinated to human emotions and answering the needs for someone how is emotionally very close. Sexuality is treated as a body function, somehow independent from “romantic” emotions.

6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?

Sexuality and disability are still taboo. It’s a very hard to discuss the topic. Training /information evenings for family, friends and assistants of people with a handicap and for those with a handicap should ensure that the importance of this matter is seen and perhaps people would be more open to communicate about this. Especially, because the definition of sexuality is completely different for people with handicap – professionals, care givers should pay more attention to each person and family, and be able to neglect the traditional social conceptions of sexuality.

It also raises questions on how far assistance can go. What boundaries are there. What is a person prepared to do without crossing his/her own values.
### Critical Incident: Trip

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#### Professional domain of the narrator

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<th>Training concerning disability</th>
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#### Sensitive zone

What do you think are the “sensitive zones” that are the key issues of this critical incident? (eg: sexuality, gender relations, aging, conceptions of the body, non-verbal communication,(MPI), etc.)

- Disabled people and their needs

#### Culture of the person experiencing the shock

What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

- A man who is in a wheelchair. He is adult, middle aged, Belgian.

#### Culture of the person “causing” the shock

What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

- The policemen passing by the group of disabled people on a tour. He is middle aged and in uniform.

#### Describing the SITUATION

**Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.**

I joined people with a disability on a daytrip. Jef is in a wheelchair and values his independence. He finds it important to move independently, even if it’s difficult. He found it hard to move in a street. A policeman told me that I had to help Jef. The policeman was friendly, but I could see he didn’t understand that I didn’t helped Jef. Jef reacted irritated to the great annoyance of the policeman. Jef didn’t reacted irritated directly to the policeman, but to me after the policeman was walked away.

1. **Elements of the SITUATION**

   **How many people were present? How many women / men? What did the space look like, how was it arranged? (sketch of the arrangement if relevant / possible). Who were the protagonists? Was there any history between them (personal or cultural)? Try to be as objective as possible.**

   **Relationship between the two groups (eg. colonial history, majority – minority)**

   There were 12 people there. Most of them were participants of the daytrip.
   The street is not really stable for a person in a wheelchair, but it is possible if you take care. It was not a busy street, just a street in the city were only passengers can walk.
   The person in the wheelchair was a social man, very friendly. The policemen were also friendly men. They don’t know the man in the wheelchair.

2. **EMOTIONAL REACTION**

   **How did you feel in this situation?**

   The narrator felt uncomfortable, also a bit angry with the policeman.
3. What norms / values / representations did the incident touch / threaten / question in you?

Respect for others. This is especially expressed when the policeman does not directly address Jef – the person in question – about his needs. In a way the policeman is “infantilising” Jef instead of treating him as an adult with a responsibility for his own life and safety as well.

Presumptions. The policeman automatically assumes that the person in the wheelchair lacks the mental capacity to take care of himself.

4. Based on the analysis of question 3 what image do you have of the other person?

e.g. positive, negative, neutral, bizarre etc.

The policeman had quite a short-sighted image of people with a disability, as if you always have to help them. You should, just like other people, ask them if they need help and if they don’t want it (like Jef) you have to respect this.

5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience? (Hypothesis 1)

Dependence of people with a handicap. People with disability are often regarded as rather helpless people, whom you have to support and help.

It is a humanistic and ethical norm to help people in need of help.

The policeman may be as a professional watching the security of citizens in the streets rather concerned and worried about Jef apparently running around a bit uncertain in his wheelchair?

6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?

Policemen, just like other public jobs, should be trained to correctly deal with all target groups. This is still not done enough. The conception image that a person with a handicap is only a dependent without personal capacities needs to be revised should also go.

As part of the intercultural training professionals in both public and private duties should be trained in asking proper questions, for instance in addressing Jef – the person in question directly about his needs, instead of talking “over his head” to the professional guide in the group.
**Name of organisation:** KVG  
**Country:** Belgium  
**Date of recording the critical incident:** 19/03/2012

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**Sensitive zone**  
What do you think are the “sensitive zones” that are the key issues of this critical incident? (eg: sexuality, gender relations, aging, conceptions of the body, non-verbal communication, disability)

**Culture of the person experiencing the shock**  
What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)  
Middle aged man, catholic, teacher, no disability, Belgian

**Culture of the person “causing” the shock**  
What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Old man, no disability, catholic

**Describing the SITUATION**

*Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.*

Our village has a family with a woman with a severe mental and physical disability. She lives at home and is cared for by her extremely old father. The woman lives isolated. She doesn’t have any contact with other people, she never comes outside. The people in our village don’t find this strange. They are impressed by the fact that the father has been able to look after her all her life, without help.

1. **Elements of the SITUATION**
   - **How many people were present? How many women / men?**
   - **What did the space look like, how was it arranged? (sketch of the arrangement if relevant / possible)**
   - **Who were the protagonists? Was there any history between them (personal or cultural)? Try to be as objective as possible.**
   - **Relationship between the two groups (eg. colonial history, majority – minority)**

   It’s not really one situation.  
The critical incident is not static. It’s a story about a situation that already takes place a lot of years. In the house there our living two people, the father and the daughter with a severe disability.  
It’s a normal house on the outside.  
The narrator doesn’t really know the two persons, and has just seen them sometimes when they go somewhere, but that’s rare. (We then just say hi).

2. **EMOTIONAL REACTION**
   - **How did you feel in this situation?**

   The narrator has many questions regarding this situation:  
He wonders whether we should have endless respect for situations like this and he also wonder whether all opportunities are being used. What will happen when the father dies: how will the daughter respond to this
and what will happen to her?

The narrator feels ignorance. He considers it as misplaced generosity.

| 3. What norms / values / representations did the incident touch / threaten / question in you? |
| Persons with mental and physical disability are often neither rejected, neither integrated which lead to indifference and social exclusion because they are not in the frame of the ordinary representation and their socialized differently. The insertion of disabled people looked subordinated of his capacity of autonomy. In the case of critical incident, the person disabled in the village is dependent of her father and both are socially excluded. This situation threatens the common good sense of mutual aid and consideration of person in need but in another hand this situation is taken for granted by the majority. |

| 4. Based on the analysis of question 3 what image do you have of the other person? |
| e.g. postive, negative, neutral, bizarre etc. |
| It’s courageous what they do, but it’s also wrong. They may lack the knowledge of existing organisations that can aid them. |

| 5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience? |
| (Hypothesis !) |
| The domicile for a disabled person is often representing security and tranquility. But this fear of what is unknown lead to social exclusion even more in the rural area where the social surrounding is less substantial. |

We have to look after our own child and not bother others with our problems.  
The social exclusion of the disabled person can also lead to the social exclusion of his family. This marginalization can be explained by the highest difficulty to access to the social goods by the necessity to assist the member of the family whose has difficulty and need support on an everyday basis. 

| 6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations? |
| This situation highlights the lack of awareness about the social exclusion of both disabled person and their family.  
It highlights as well the need of new policies taken into account the member of the family in their supporting role. Moreover it highlights the problem of the need of external support by developing information and specialized structures especially in the rural areas. |

**OTHER RELEVANT INFORMATION**

Alternative action:

Convince parents of several days’ therapy at home. Homecare.

Calling carers to pay a visit.
### CRITICAL INCIDENT: Fair Employer

**Name of organisation:** KVG  
**Country:** Belgium  
**Date of recording the critical incident:** 19/03/2012

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#### Sensitive zone
What do you think are the “sensitive zones” that are the key issues of this critical incident? (eg: sexuality, gender relations, aging, conceptions of the body, non-verbal communication)

Disability

#### Culture of the person experiencing the shock
What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Young man (30 years old), physical disability, no wheelchair, smart, positive, Belgian

#### Culture of the person “causing” the shock
What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Middle aged man, big, not friendly, Belgian

### Describing the SITUATION

*Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.*

At a job fair I went to an organisation to find work. I have a degree in welfare work. I also have a mobility problem. I mentioned this to the organisation I was talking to. It was an organisation where I could apply for a job as social worker, in a social organisation. So my degree was correct for this work. It’s more administrative work, so not walking or moving a lot.

They then told me that they employ several people with a disability. That there are adaptations for them at work. They don’t want to employ someone else with a physical handicap, as they have enough already. They literally said: “We already have enough.” Then the conversation was over. I didn’t got the chance to say more, because the man went to the next person who had a question.

#### 1. Elements of the SITUATION

**How many people were present? How many women / men?**

What did the space look like, how was it arranged? (sketch of the arrangement if relevant / possible)

Who were the protagonists? Was there any history between them (personal or cultural)? Try to be as objective as possible.

**Relationship between the two groups (eg. colonial history, majority – minority)**

It was only me and the man where the narrator spook to. There were more people on the fair, but can’t say correct how many. Maybe around 500?

The fair was a big place with different stands from different organisations.

The narrator never saw the man he spoke to before, they didn’t know each other.

#### 2. EMOTIONAL REACTION

**How did you feel in this situation?**
The narrator felt bad and was really shocked by the reaction. He felt misunderstood and disappointed in the organisation. The narrator experienced a sense of discrimination and felt he wasn’t given a chance because of his disability.

3. **What norms / values / representations did the incident touch / threaten / question in you?**

Everyone should get a fair chance.

People shouldn’t immediately judge on the basis of the physical appearance. They should know there is a philosophy behind legal quota. They should learn also that reaching quota doesn’t mean the job’s done. Behaviour and acceptance towards persons with a disability are also important.

Lack of equality and discriminatory behaviour due to disability.

4. **Based on the analysis of question 3 what image do you have of the other person?**

*e.g. postive, negative, neutral, bizarre etc.*

The narrator found the other person very short-sighted. He didn’t want to listen to me and the narrator’s abilities. He didn’t look beyond the handicap. He should revise what the fundamentals are of social work.

5. **What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience? (Hypothesis !)**

Strictly comply with the law. They already have enough people with a disability working at their organisation, so for the statistics they don’t need more. They didn’t look further than just the disability.

Linking the body with a mental handicap. This happens often. The narrator is a smart man who studied, but the man causing the shock didn’t even take the time to listen to his competences. It often happens that people just see the disability and then make their own conclusions about their abilities.

6. **Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?**

The abilities of people with a handicap are often underestimated. In society we are often regarded as ‘poor souls’ who need help, while we have just as many capacities as others.

Some people also believe that someone with a physical handicap is also limited mentally. They are often approached this way. An incorrect image is created of people with a handicap by society and the media. Professionals should have significant input to change this image.

**OTHER RELEVANT INFORMATION**

The narrator had this further reflection on an alternative action:

I could have reported the reaction to the organisation, so this wouldn’t happen in the future or the person in question would be told off.
## CRITICAL INCIDENT: Transportation

**Name of organisation:** KVG  
**Country:** Belgium  
**Date of recording the critical incident:** 19/03/2012

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### Sensitive zone

What do you think are the “sensitive zones” that are the key issues of this critical incident? (e.g. sexuality, gender relations, aging, conceptions of the body, non-verbal communication, Disability (perception))

### Culture of the person experiencing the shock

What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

- Middle aged man (around 50), no disability, working with people with a disability

### Culture of the person “causing” the shock

What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

- Middle aged man, no disability

### Describing the SITUATION

Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.

I’m on the bus. A middle-aged man is seated next to me. A young man in a wheelchair wants to get into the bus. He can do this, but still needs to make an effort. The man who was already on the bus sees this and tells me: “What a poor soul isn’t he?” I didn’t respond to this, I just ignored it.

### 1. Elements of the SITUATION

**How many people were present? How many women / men? What did the space look like, how was it arranged?** (sketch of the arrangement if relevant / possible). **Who were the protagonists?** **Was there any history between them (personal or cultural)?** Try to be as objective as possible.

*Relationship between the two groups (e.g. colonial history, majority – minority)*

The critical incident takes place in a bus. The narrator was sitting next to a man, another man in the wheelchair comes in, and there were around 15 other people sitting in the bus. Nobody of the persons involved in the case, knew each other.

### 2. EMOTIONAL REACTION

**How did you feel in this situation?**

The narrator felt insulted in the young man’s place. The other man reduced him to his physical handicap, as if that’s all that matters. He was angry and feel embarrassed.

### 3. What norms / values / representations did the incident touch / threaten / question in you?

Equality of people. Educations and inclusion policies for persons in wheelchair or disabled has permitted to reduce the common negative and misery perception on disability (special urban development, visibility of disabled people in the media, integration policy at work, etc.). The comfort and welfare for persons in wheelchair have been considerably increased and allowed them to be independent and equal in the...
everyday life. The handicap is not an obstacle to live a full live.
People living with a disability are not poor.

Respect towards strangers.

Presumptions. He doesn’t have an open mind and judges a person without even knowing him.

4. Based on the analysis of question 3 what image do you have of the other person?

e.g. positive, negative, neutral, bizarre etc.

The narrator has a negative image of the other person, he find the man pretentious by judging in such a way about someone he doesn’t know. The narrator has the impression that the man finds the boy in wheelchair inferior because of his handicap.

The man didn’t mean any harm, but it still angered me that he didn’t look beyond this boy’s handicap.

5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience? (Hypothesis !)

Vulnerability of disabled persons:
A person being physically reduced and disabled is different from the social model. Toward the history this difference had led to different exclusions and repudiation (deportation in unknown places...). The perception of disabled people in our society has evaluated but the lack of knowledge about disability still lead people to see them as less productive and needed to be care. The handicap would prevent to live a full life and attract either pity or admiration.

Respect: he probably also finds this important, but expresses it differently.

People with a disability need to be helped. They can’t help themselves very well.

Youngsters should be carefree.

6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?

A handicap is still regarded as a limitation to be able to function in normal society. This is because of the ignorance of people. They simply don’t know that people with a disability can often simply live in society.

People should have an open mind and think twice before they speak. This is often because they simply lack the knowledge and they don’t know any persons with a disability themselves. Hearing testimonies (in f.e. school) might give them a more broad perspective.

OTHER RELEVANT INFORMATION

Alternative action:
You can talk to the man and say he shouldn’t pity the young man. You could make it clear that living with a disability doesn’t necessarily have to be a limitation.
CRITICAL INCIDENT: Cinema

Name of organisation: KVG
Country: Belgium
Date of recording the critical incident: 19/03/2012

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<th>Professional domain of the narrator</th>
<th>Gender edu</th>
<th>Health edu</th>
<th>Sexuality edu</th>
<th>Training concerning disability</th>
<th>General intercultural edu</th>
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Sensitive zone
What do you think are the “sensitive zones” that are the key issues of this critical incident? (eg: sexuality, gender relations, aging, conceptions of the body, non-verbal communication,

Disability

Culture of the person experiencing the shock
What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Young woman, 25 years old, no disability, social worker, catholic

Culture of the person “causing” the shock
What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Middle aged woman, no disability, commercial manager

Describing the SITUATION
Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.

I was at a café for people with a physical handicap and a woman in a wheelchair came in rather angry. She joined us and said she just wanted to go to the cinema to see the film “Hasta la Vista”. This is a film about three young men with a physical disability who go to Spain together. It had just come out. She couldn’t see the film, however, because it was playing in a room that isn’t accessible for wheelchair users. I then went to talk to the cinema’s manager who told me that it was more interesting commercially to play this film in an inaccessible room, as it allows more people, because places for people in a wheelchair require a lot of space.

1. Elements of the SITUATION
How many people were present? How many women / men? What did the space look like, how was it arranged? (sketch of the arrangement if relevant / possible). Who were the protagonists? Was there any history between them (personal or cultural)? Try to be as objective as possible.

Relationship between the two groups (eg. colonial history, majority – minority)

There were 6 people, 4 of them had a physical disability, 2 of them were professional workers. The café where they sat is a large one, a very open space where you have to get your drinks yourself. In total there were around 25 people in the café. The people around the table didn’t know each other, because it was the first time they met. Only the professional workers knew each other and one other guest at the table was already know by the social workers, but not in personal. Also the other guests didn’t know each other.

2. EMOTIONAL REACTION
How did you feel in this situation?

The woman was indignant and angry.
3. What norms / values / representations did the incident touch / threaten / question in the narrator?

Equality of people, empathy. Lack of understanding that money isn’t always the most important factor.

4. Based on the analysis of question 3 what image does the narrator have of the other person?

e.g. postive, negative, neutral, bizarre etc.

The people who decide which film plays in which room should think logically and realise that people with a physical disability would like to see this film. They gave any thought to this and only considered their income.

5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience?

(Hypothesis !)

Materialism/making a profit comes first. Equality and understanding are considered less important than money.

6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?

Society should learn to take account of everyone. In the cinema people with a low income e.g. get a special pass so they can go to the cinema cheaper. This is a great initiative, so they can also enjoy this piece of culture. Society should realise that people with a handicap also want to integrate, but this is only possible if people are open to this. Every room should be accessible for persons with wheelchairs.
CRITICAL INCIDENT: Finger

Country: France
Date of recording the critical incident: 2012

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<th>General intercultural edu</th>
<th>Physical edu / sport</th>
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What do you think are the “sensitive zones” that are the key issues of this critical incident? (eg: sexuality, gender relations, aging, conceptions of the body, non-verbal communication,
Physical contact and disability

What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Woman, 45 years old, physical therapist, 2 children, women’s rights activist, left-wing, passionate about her career, French with a German background. Lives in Paris, but if she could, she would live closer to nature.

What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability, particular subculture, etc.)

Woman, around 60 years old, married without children, retired, former teacher, pretty athletic. She participates in the workshop to rehabilitate her knee after a bike accident. Middle class/bourgeois.

**Describing the SITUATION**

Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.

The situation took place during a balancing exercise that I have been leading for a number of years in a rehabilitation center for people at risk for falling, either because of a problem involving the loco-motor apparatus (the system of bones, joints, muscles and nerves responsible for posture and movement), neurological diseases, aging, vision problems, or a reduction in muscle strength.

Most of the exercises are individual: move around by avoiding obstacles, stay standing with one’s eyes closed, remain balanced on one leg, etc. This time, I asked them to form a circle by holding hands with each other (to practice balance on the group level). They all went towards the center of the circle, then, towards the outer edge. They went to the right, then to the left. They laughed, some people sang. There was a very happy and relaxed atmosphere. Suddenly, one of the participants left the circle, excusing herself and saying she had to leave immediately because she had forgotten a very important appointment. She seemed to be nervous. I asked her if she was okay and she said yes, leaving quickly. We were all a bit confused. I tried to continue the activity and keep the same atmosphere, but I must admit that it was pretty difficult.

A little later, this lady called me on my professional cellphone and, a little upset, explained that the story about the appointment hadn’t been true. In fact, she had left because she couldn’t bare to hold hands with someone who had an amputated finger and that she had to leave like that because she had almost fainted. I told her that I was really sorry and I tried to calm her down but she told me that I should have been...
careful with the type of activity that I chose given the presence of this person with an amputated finger and that she had had a very distressing experience. I tried to apologize, but she wouldn’t let me speak. She told me that she would call me back and she hung up. I was paralyzed. She never came back and I never tried to contact her either. I decided that it wasn’t a logical reaction. I found it rather disproportionate. The following session, one of the participants asked me if I had heard from this lady and I told him no…I didn’t dare talk about it. I was afraid of hurting the feelings of the person with the amputated finger.

1. Elements of the SITUATION

How many people were present? How many women / men? What did the space look like, how was it arranged? (sketch of the arrangement if relevant / possible). Who were the protagonists? Was there any history between them (personal or cultural)? Try to be as objective as possible.

Relationship between the two groups (e.g. colonial history, majority – minority)

The situation took place in the recreational room of a private rehabilitation center located 30 minutes from Paris in a rather wealthy suburb. The room is nice: the walls are white, but there are two large windows that open onto the garden, which gives the feeling of being in nature. In the room, there are a number of plastic objects in different colors and shapes (triangles, cones, little balls, etc.) that can be used as obstacles. On one side of the room, there are parallel bars and the other has a large mirror. The group of participants is mixed (5 men, 7 women) and the average age is 65 years old. All the participants live in the area, which means they are all rather well off. Most are retired, except 3 people who work independently (the workshop took place in the morning two times each week from 10:00 to 11:30am).

Concerning the psychological context, the group consisted of individuals having a light motor handicap which was transitional for most, while for others it was permanent or even progressive. This context can create a psychological fragility in the participants, especially for those who see their autonomy diminishing.

2. EMOTIONAL REACTION

How did you feel in this situation?

In the moment, when the lady left the room, I was a little confused. The excuse about the appointment didn’t make much sense to me, but I couldn’t imagine anything else because the atmosphere was so nice. After, when I spoke to her on the phone, I was completely shocked. My first reaction was to apologize for making her have a very bad experience. I felt guilty. However, as she continued to accuse me of not having been careful when choosing the activity, I felt attacked, insulted even, especially because of the way in which she was talking to me. In the end, I felt powerless because she basically hung up on me without giving me a chance to defend myself.

3. What norms / values / representations did the incident touch / threaten / question in the narrator?

Disability doesn’t exclude working in groups. To the contrary, for the narrator, the best condition for completing rehabilitation is as a group. An amputated or handicapped body can be a beautiful body. It’s the way of approaching the body/of experiencing it that will make the body beautiful or not. There is no need to hide a disability. People with physical or psychological handicaps must be integrated into the group. They need to be included in our daily lives.Universalism: Same treatment for everyone, without discrimination. We must not modify the program or the proposed activities because of the presence of a person whose handicap doesn’t prevent him or her from executing the exercises.

4. Based on the analysis of question 3 what image does the narrator have of the other person?

Negative

5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience? (Hypothesis !)

-Beauty is incompatible with disabilities or an amputated body.
- Hypothesis: Disability is a taboo, you have to pretend not to see it. At the same time, touching the disabled reminds draws attention to it and makes it impossible to ignore. By touching the disabled it is difficult to pretend that it doesn’t exist.

- The Encounter: Physical intimacy with a disability is a broken mirror that reflects an image of vulnerability of one’s own body. In a way, disability makes the body more visible, more carnal. It is more difficult to erase it and to deny its importance.

- Amputated or disabled areas of the body may be more sensitive. Do not touch them.

- A health professional must make sure that patients/participants are protected/preserved from bad moments, especially upsetting experiences. He/she must know how to prevent them.

6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?

Physical contact and disability. Working as a group with people living with different types of disabilities.
**CRITICAL INCIDENT: Kiss**

**Country**: Hungary  
**Date of recording the critical incident**: 21 April 2012, Budapest / Ars Erotica Foundation - Hungary

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<th>Professional domain of the narrator</th>
<th>Gender edu</th>
<th>Health Edu</th>
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**Sensitive zone**  
What do you think are the “sensitive zones” that are the key issues of this critical incident? (eg: sexuality, gender relations, aging, conceptions of the body, non-verbal communication, sexuality, conceptions of the body, privacy, non-verbal communication, norms of the client-professional relationship)

**Culture of the person experiencing the shock**  
What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability particular subculture etc)

- helper, professional - young, healthy (not-disabled) woman

**Culture of the person “causing” the shock**  
What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability particular subculture etc)

- disabled man, client,

**Describing the SITUATION**  
*Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.*

I went out for a beer with a disabled young man. Having drunk a few pints, the boy (let’s call him Pál) asked me to kiss him on the lips. I said “no”. But we spent the rest of the evening together anyhow. We talked and laughed a lot. Since we had drunk lots of liquid (alcohol), I also had to help him change his urine catheter. At the end of the evening, he asked me again to kiss him. I said “no” again and left for home.

**1. Elements of the SITUATION**  
What happened? Where did it happen? Who were the protagonists? Was there any history between them (personal or cultural)? Try to be as objective as possible.

- The protagonists of the incident include: Pál, who had a spinal cord injury 7 years ago and has been a wheelchair user since then. He is resident of the institution I work for.
- The other protagonist is me. I work as a social worker for the institution where Pál lives.
- The incident I described above happened in Budapest, in the summer of 2011.

**2. EMOTIONAL REACTION**  
How did you feel in this situation?

- I was embarrassed but also impressed that he made passes at me. I was longing for him but also disgusted by him. I felt he had great confidence in me as he asked me to help him with changing his urine catheter that was not my duty. I greatly liked him.

**3. What norms / values / representations did the incident touch / threaten / question in the narrator?**  
The relationship between the social worker and the client was greatly compromised. They have crossed the line. The social worker was stretching the boundaries of her job description and the rules of the Code of Ethics. If she had given in to temptation, she would have got involved in a friendly or even love affair with a
client. She was risking her job.

4. Based on the analysis of question 3 what image does the narrator have of the other person?

*E.g. positive, negative, neutral, bizarre etc.*

For the narrator, he was just a young man with good cognitive capabilities who tried to make a pass at a girl who tried to be friends with him. For this reason, her opinion about Pál is rather positive.

5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience? *(Hypothesis!)*

Pál probably liked the idea of a young girl going out with him for a pint. He had always looked for the opportunity to be with the narrator, probably because he liked her as a woman. He did not look at her as a helper but as representative of the other gender. He probably didn’t have any relationship with a girl since he was injured. In addition, he involved the narrator in an activity (changing his urine catheter) which required intimacy and great confidence.

6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?

From a professional point of view, the narrator should not allow such a close relationship to develop between the herself and the client (if it is forbidden in the Code of Ethics). However, the narrator understood and accepted the fact that he made passes at her. But the narrator felt that she may not allow such situations to develop. So when she finds herself in a situation where a client is trying to make passes at her she feels “I’ve got to step out of it”. (taking a distance from Pál as a patient/client). However in a helper-, social worker-, care giver-client interaction it may often happen that the professional and the client build up an emotional and intimate human relationship – many times this is simply inevitable. The question – either from a professional or a personal point of view – is how these emotions are communicated in the situation and later how they are solved for the professional. Case discussions and regular supervision for professionals can help to analyze, understand these emotions and handle them.

**Other Relevant Information**

Pál has been impotent since his accident. He was unable for erection. So PV (penis vagina) sex could not have taken place anyway. Since that evening their relationship has weakened and the narrator concluded for herself that in such situations she should not give in at all.
# CRITICAL INCIDENT: Touching

**Name of organisation:** organisation is engaged in the rehabilitation of disabled people, the respondent is a disability therapist  
**Country:** Hungary  
**Date of recording the critical incident:** 21 April 2012, Budapest / Ars Erotica Foundation

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**Sensitive zone**  
What do you think are the “sensitive zones” that are the key issues of this critical incident? (eg: sexuality, gender relations, aging, conceptions of the body, non-verbal communication)  
sexuality, gender relations, conceptions of the body, norms of the professional-client relationship

**Culture of the person experiencing the shock**  
What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability particular subculture etc)  
23-year-old woman, atheist, heterosexual, lives in Budapest, university graduate, disability therapist, liberal, animal-loving, Hungarian

**Culture of the person “causing” the shock**  
What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability particular subculture etc)  
21-year-old man, Catholic, heterosexual, lives in Budapest, disabled, has a skull and frontal lobe injury, paralyzed on his left side, Hungarian

**Describing the SITUATION**  
*Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.*

At my workplace a disabled young man touched my breast. The incident happened in my office when -after class - he asked me to help him put on his coat. It was November 2010. After the incident I warned him in loud voice that he should not have done such a thing. He apologized then left my office.

1. **Elements of the SITUATION**

   **What happened? Where did it happen? Who were the protagonists? Was there any history between them (personal or cultural)?** Try to be as objective as possible.

   **Protagonist 1:**  
   21-year-old man, had a skull injury, uses electronic wheelchair. He had his frontal lobe injured so he has no inhibitions, he speaks his mind. He acts instinctively and is very much interested in sexuality.

   **Protagonist 2:**  
   23 year-old woman, at that time, starting her carrier as a therapist. She had been working there for one and a half months. She was an average woman. Before the incident described above the man asked her if she wanted to be his girlfriend (in October that year).  
   The situation happened in the narrator’s therapeutic room, at her workplace after a consultation. They were in a therapist-client relationship.

2. **EMOTIONAL REACTION**

   **How did you feel in this situation?**
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3. What norms / values / representations did the incident touch / threaten / question in the narrator?

Although he is different, he has a natural need for a relationship with a woman and he does not understand why a not-disabled woman cannot be his partner, although she helps him in everything else.

“Can I be nice and sociable with my clients most of whom are young men of my age? Won’t they get it wrong? Am I perhaps not making myself clear?”— those were the very first questions raised in the narrator.

If a professional likes a client, can they have a relationship other than just professional? If so, will they be able to carry on with the professional work together?

4. Based on the analysis of question 3 what image does the narrator have of the other person?

*e.g. positive, negative, neutral, bizarre etc.*

The narrator had known her client for one and a half months and she was aware of his patient history. The perception she had of this man is negative (but – according to her – it’s not his fault, he will never be able to change his behaviour). He is uninhibited, upsetting and difficult to manage.

5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience? *(Hypothesis!)*

As a consequence of his instinctive behaviour and brain injury he cannot keep his desires under control. In that moment the narrator was not his instructor but a girl of his age whom he wanted to caress. He only wanted a relationship but he was not aware of the realities. It did not occur to him that what he wanted was different from what the narrator wanted in that situation.

6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?

The Code of Ethics in the narrator’s institution strictly defines the limits of a therapist-client relationship. However, when meeting a nice and attractive client one may think why would not it be possible to make passes at him as a woman. This is a difficult question especially when one works with disabled people.

How should one behave to avoid similar incidents?

**OTHER RELEVANT INFORMATION**

The incident has not recurred since then, but from time to time there are clients who try to make passes at therapists.
Name of organisation: Aikido instructor – Martial arts
Country: Hungary
Date of recording the critical incident: 13 April 2012, Budapest / Ars Erotica Foundation

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Sensitive zone: What do you think are the “sensitive zones” that are the key issues of this critical incident? (eg: sexuality, gender relations, aging, conceptions of the body, non-verbal communication)
- gender relations, disability, non-verbal communication

Culture of the person experiencing the shock: What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability particular subculture etc)
- White, middle-class, highly educated, young woman, Aikido instructor – belonging to a special subculture as a woman, heterosexual, living in a marriage

Culture of the person “causing” the shock: What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability particular subculture etc)
- Mentally disable children

Describing the SITUATION
Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.

About 10 years ago we as a martial art team were asked to make a show and do an aikido class in Vértes at the holiday resort for mentally disabled children.
The critical incident involves the children’s reactions and questions.
From the moment we arrived the children were wary of us (ferocious people, samurai swords ...). They waited in a disciplined manner for the show to finish. Then our manager who was my husband told the children to feel free ask us questions. The answers for the questions showed that martial art was arduous and hard work. This is a way of life. The last question from the children was: “And what does your wife think about this?” And he said: “Go and ask her. She is standing in the line.” The children started to clap their hands in a standing ovation and cried.

1. Elements of the SITUATION
What happened? Where did it happen? Who were the protagonists? Was there any history between them (personal or cultural)? Try to be as objective as possible.

The situation happened in a holiday resort for mentally handicapped children. There were a stage where the aikido show happened and the audience were the children. They were about 10-12 years old.

2. EMOTIONAL REACTION
How did you feel in this situation?

The sincere reaction of the children took me by surprise.
I was moved.
<table>
<thead>
<tr>
<th>3. What norms / values / representations did the incident touch / threaten / question in the narrator?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sincerity</td>
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<tr>
<td>Acceptance</td>
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<tr>
<td>Love</td>
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<tr>
<th>4. Based on the analysis of question 3 what image do the narrator have of the other person?</th>
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<tbody>
<tr>
<td><em>e.g. positive, negative, neutral, bizarre etc.</em></td>
</tr>
<tr>
<td>They were kind and open people.</td>
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<tr>
<td>Their disability was not a constraint, but it actually helped them pay attention and stay focused. They did not have any superficial expectations.</td>
</tr>
</tbody>
</table>

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<tr>
<th>5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience? <em>(Hypothesis !)</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>The openness which enables them to be glad to get personal information.</td>
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<tr>
<th>6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?</th>
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<tbody>
<tr>
<td>This situation might be a good example how much is worth to dismiss our expectations and stereotypes toward people who have anything we think to be “otherness”.</td>
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</tbody>
</table>
CRITICAL INCIDENT: Beauty

Country: Hungary
Date of recording the critical incident: 21 April 2012, Budapest / Ars Erotica Foundation

<table>
<thead>
<tr>
<th>Professional domain of the narrator</th>
<th>Gender edu</th>
<th>Health edu</th>
<th>Sexuality edu</th>
<th>Training concerning disability</th>
<th>Intercultural edu</th>
<th>Physical edu / sport</th>
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<td></td>
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<td></td>
<td></td>
<td>X - disability and harmony, able-bodiedness</td>
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</table>

Sensitive zone
What do you think are the “sensitive zones” that are the key issues of this critical incident? (eg: sexuality, gender relations, aging, conceptions of the body, non-verbal communication)
Can a disabled body radiate beauty and harmony?

Culture of the person experiencing the shock
What are the cultural reference frames of the narrator of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability particular subculture etc)
45-year-old, urban, middle-class, educated woman

Culture of the person “causing” the shock
What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience? (think beyond nationality / religion to also: age, gender, sexual orientation, political standpoint, disability particular subculture etc)
Young man with a prosthetic leg

Describing the SITUATION

Please give a short account (10-15 sentences) of a critical incident you experienced. Write from your own point of view. Include where and when the incident took place.

It’s a hot summer day. My clothes and body are unbearable. I’ve recently got off the bus and now I’m walking on the bus station at a comfortable speed. I watch the bodies of the people walking in front of me. All of a sudden I notice a young man with a beautiful body, walking ahead of me: his beautiful athletic body is an aesthetic pleasure. Keeping my eyes on his body and admiring him I realize that one of his legs is a prosthetic leg. I’m taken aback because the way he uses his body radiates harmony and fitness. It takes me 5-10 minutes to recover. I start to guess what could have happened to him and conclude that it was probably an accident. Afterwards I feel gratitude for having an abled body (which is actually not true because I lost the distal phalanx of my right index finger in an accident.)

1. Elements of the SITUATION

What happened? Where did it happen? Who were the protagonists? Was there any history between them (personal or cultural)? Try to be as objective as possible.

I am walking in the city of Székesfehérvár on the bus station in a hot summer afternoon. Suddenly I notice a young man in his mid-twenties walking in front of me: his beautiful athletic body is an aesthetic pleasure. He is wearing a black T-shirt and denim Bermuda shorts. His walk is natural and harmonious. I am amazed by it. My eyes start to scan down his body when I realize that one of his legs is a prosthetic leg as his shorts clearly reveal it. I am shocked by what I see and slow down walking. It takes me 5-10 minutes to recover. I start to guess what could have happened to him and conclude that it was probably an accident.

2. EMOTIONAL REACTION

How did you feel in this situation?

The visual joy was immediately turned into a complete shock from which I recovered only 5-10 minutes later. Afterwards I felt gratitude for having an abled body. (Funnily enough, now that I’m writing it down, I realize that this is not true. I lost the distal phalanx of my right index finger in an accident.) I got so much used to
my own disability that I don’t even perceive it as such.)

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<thead>
<tr>
<th>Question</th>
<th>Description</th>
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<td>3.</td>
<td><strong>What norms / values / representations did the incident touch / threaten / question in the narrator?</strong> For the narrator missing limbs and the harmonious use of the body had been conflicting terms before this incident.</td>
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<td>4.</td>
<td><strong>Based on the analysis of question 3 what image does the narrator have of the other person?</strong> <em>e.g. positive, negative, neutral, bizarre etc.</em> Absolutely positive.</td>
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<td>5.</td>
<td><strong>What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience? (Hypothesis I)</strong> He fully accepts and enjoys his body parts which is confirmed by his way of walking. It suggests that he is a complete, whole and sexy guy.</td>
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<td>6.</td>
<td><strong>Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?</strong> This situation raises the question what makes a disabled person. Just because we consider someone disabled does not necessarily mean that he is one.</td>
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</table>
CRITICAL INCIDENT: Cooking Lesson

Name of organisation: European Centre of Studies and Initiatives (CESIE)
Country: Italy
Date of recording the critical incident: 21st of March 2012

<table>
<thead>
<tr>
<th>Professional domain</th>
<th>Training concerning disability</th>
<th>Training concerning mental disability</th>
<th>non-verbal communication</th>
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</table>

Sensitive zone: What do you think are the “sensitive zones” that are the key issues of this critical incident?
Perception and treatment of handicap, disability subculture

Culture of the person experiencing the shock: What are the cultural reference frames of the narrator of the shock that may have played in the shock experience?
Sicilian female (Palermo) that has been living abroad for a while and in the north of Italy / Age 28 / Heterosexual / Studies in political science / first working experience with people living with disability / baptized as Catholic Christian / unmarried /

Culture of the person “causing” the shock: What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience?
Sicilian male / Age 70 / unmarried / living in a shared house with other people living with disability, managed by a local charity / Hobbies: gardening and cooking.

Describing the SITUATION

In 2009 I was working as an educator with people with cerebral palsy in their daily lives. So that I attended a cooking course with Giovanni (the person in need of an Accompanying person, a seventy years old man in the wheelchair, with serious difficulties in movement and very little speech. In the kitchen of a College, the cook told us to prepare some biscuits and he gave us a list of ingredients and the kitchenware.
I was very concerned of my task, being very focused in preparing nice biscuits for Giovanni, thinking that he was not able to manage the ingredients and above all knives, spoons or plates. During the two-hour course, Giovanni was very agitated, moving his arms and complaining of something I could not understand. When biscuits were ready, I put them in the oven, waiting for them to rise. But they had never risen!
Giovanni was complaining and indicated the ingredients that I forgot to add in the biscuits, when I realized that I had not involved him in any part of the cooking lesson. My assisting approach with people with a disability was far away from Giovanni’s expectations. He was expecting me to empower his cooking skills. My approach with a disabled body made me think that he was not able to do things (cutting, mixing, etc) that he had always done on his own.

1. Elements of the SITUATION
What happened: The different cultural references frame in terms of disability, conception of the body, misunderstood non-verbal communication and Giovanni’s advanced age made the communication flow counterproductive between Giovanni and myself.
Where did it happen: In Palermo, Sicily - in the kitchen of a College open in the afternoon for educational activities with adults living with disability.
Who were the protagonists:
(i) A professional adult educator but with little experience with disable people,
(ii) A disabled 70 years old man with cerebral palsy in wheelchair.
Was there any history between them:
The two protagonists had meet previously a couple of times, but they were never involved in joint activities.

2. EMOTIONAL REACTION
When the narrator realised that Giovanni was trying to draw her attention on the missing ingredients and on the correct use of these, she felt that she has not been able to listen and understand his complaints, his (non)words. She felt as she has acted only driven by her conception of disability as a form of incapacity, when actually he was much more capable than her. She felt like she has judged his capacity to use his hands before to make him try. She felt very disappointed with herself.

3. What norms / values / representations did the incident touch / threaten / question in you?

The elements of her cultural reference frame questioned were. The representation of the daily activities and opportunities for people with disabilities / The representation of the human body, of its limits and capacities. An able person see at first the handicap as a limitation in the everyday life forgetting the alternative way to reach the same result for a daily activities but in another manners and the different resource the body can develop. The different value of respecting the persons we are collaborating with, listening his/her points of view, opinions and ideas, when the modality to express themselves is different (non-verbal communication). The socializing process teach us some precise way to communicate and collaborate with each other. When it appears that his process has been developed in a different manner for a disabled person, it can lead to contradict way of communication.

Norms referring to team-work

When persons without handicap collaborate, the division of task is made according to the possibility, knowledge and skills of each other in order to be the most competitive. In the critical incident her disability particular subculture, linked to an “assistance-focused approach” and far from the idea of empowering people with disabilities, supporting a further development of the already acquired competences.

4. Based on the analysis of question 3 what image do you have of the other person?

e.g. positive, negative, neutral, bizarre etc.

Giovanni taught me to be positive and patient - which is the image of him I gained through this experience

5. What could be the norms / values / representations of the other person / culture that led to the specific behavior that caused the shock experience? (Hypothesis !)

Giovanni’s norms and values:
Different approach of problem solving and different body language (body language / Facial expressions)Giovanni lives in a society where his disability is considered just a different way of living a normal life: his daily life includes sharing the house with friends, attending cooking lessons, watching football matches at the stadium, going shopping etc. This representation of his disability and values linked to mutual listening and understanding, led him in expecting in the critical incident to a collaboration in the kitchen during the cooking lesson. His behaviour was also led by the conception that Giovanni had of his own body.

6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?

The situation highlights the difficulties that can rise when there are differences linked to the understanding and the facing of daily life events with people living with a disability. The disability subculture is lead not just by personal perceptions but also by the national social policies in the field of disability. In south-Italy very often people with a disability are not involved in social activities, meaning people usually do not know their potential and resources. There are some exceptions, like in the case of Giovanni’s centre, that try to make generally disable people very active and integrated in the civil society.

The cultural differences have led the two protagonists in a problematic situation were disability was a insuperable limit of communication.

OTHER RELEVANT INFORMATION

This critical incident, together with some others, provoked the change my approach on disability and on perception of body’s limit.
CRITICAL INCIDENTS: Theatre Festival

Name of organisation: CESIE
Country: Italy
Date of recording the critical incident: 21st of March 2012

<table>
<thead>
<tr>
<th>Professional domain</th>
<th>Gender edu</th>
<th>Health edu</th>
<th>Sexuality edu</th>
<th>Disability</th>
<th>General intercultural edu</th>
<th>Physical contact</th>
<th>Arts (theater, dance)</th>
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Sensitive zone
What do you think are the “sensitive zones” that are the key issues of this critical incident?
Conception of the body / disability

Culture of the person experiencing the shock
What are the cultural reference frames of the narrator of the shock that may have played in the shock experience?
Serbian female living in Palermo (Italy) since 2006 / Age 27 / heterosexual / atheist / EU project manager / Studies in management of arts and culture / practicing theatre / interested in discovering different cultures and challenging stereotypes.

Culture of the person “causing” the shock
What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience?
Young looking female / Evident level of high physical handicap / open and shiny person.

Describing the SITUATION
The incident took place in occasion of the International Festival of Homeless Theatres ERROR in Bratislava, Slovakia. [http://www.divadlobezdomova.sk/divadlobezdomova/WELCOME.html](http://www.divadlobezdomova.sk/divadlobezdomova/WELCOME.html) The Festival is known for participation of theatrical groups working with homeless people, disabled (physical and mental). A group of colleagues and friends and myself decided to participate in the Festival.
We met during another project about arts and sexuality but decided to study a theatrical text about homelessness and to create a play using improvisation and our experiences as social workers, facilitators, artists, trainers or managers of intercultural projects.
We arrived in Bratislava, in “Studio 12”, the place where the general rehearsal took place. We met a group of actors from Bratislava. In order say hello we shook hands, said our names and the country we came from.
One member of a theatre team had an evident physical handicap, she didn’t have arms and her height was less than 1 meter.
The members of the other team had never met her before but some of them had seen some videos of her theatre group and already noticed her active involvement in the activities of the theatre workshop despite her handicap. Nevertheless, the handicap of the girl was evident. For a second I thought to hold out my hand to her in order to present myself, as I did with other members of her theatre group.

1. Elements of the SITUATION

What happened? Where did it happen? Who were the protagonists? Was there any history between them (personal or cultural)? Try to be as objective as possible.

What happened:
A young women participating to a theatre festival felt strongly embarrassed while after shaking hands to introduce herself to the other members of the theatre team, she has realized that one of them is without arms. She does not know how to act.
**Where did it happen:**
The situation took place in a Studio in Bratislava for a rehearsal of theatre.

**Who were the protagonists:**
(i) A young women project manager  
(ii) A young women with visible disabilities  

**Was there any history between them (personal or cultural):**
The two protagonists meet for the first time. However both practising and have strong interest in theatre.

### 2. EMOTIONAL REACTION

**How did you feel in this situation?**
The narrator felt embarrassed at the moment of the incident although he didn’t hold out his hand in the end. His emotional reaction was very strong and he was reflecting for a long time about disabilities and how able persons are not used to the presence of people with a high level of physical disability because they are usually socially excluded and not integrated in the daily activities of non disabled, so there is no frequent contact and possibility to share daily activities and live together.

### 3. What norms / values / representations did the incident touch / threaten / question in you?

**Categorization:**
Societies has establish the need of categorizing people while the first encounter and judgements are really often base on the physical appearance. When physically, the person appears to be out of the common acceptance of what is considered as normality, it became challenging to develop a deeper perception beyond his physical difference. Being confronted to a visible physical disability act as a mirror of our own deepest fears and create discomfort and embarrassment.

We adapt our comportment like if we were not confronted to our equal.

### 4. Based on the analysis of question 3 what image do you have of the other person?  
**e.g. positive, negative, neutral, bizarre etc.**
The impressions of the narrator about the other person were and are still very positive.

### 5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience?  
**(Hypothesis !)**

**Overcome the limited opportunities of disabilities**
The self-image of persons with disabilities are often reflection of social stereotypes or reactions to them and they can find their opportunities limited because of social rejection or practical inaccessibility.

Related to this social construction of the capacity of disabled persons, some of them might overcome those stereotypes by giving “lesson of courage” and existing by surpass themselves.

### 6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?

The situation tackled different perceptions of the human body and relations to/acceptance of disability and handicap. In particular, contact with people with disabilities let the person facing a critical incident about acceptance of different approaches to disabled people and the necessity of attention to the concrete disability.
**Name of organisation:** CESIE  
**Country:** ITALY  
**Date of recording the critical incident:** 21st of March 2012

<table>
<thead>
<tr>
<th>Professional domain</th>
<th>Gender edu</th>
<th>Health edu</th>
<th>Sexuality edu</th>
<th>Training concerning disability</th>
<th>General intercultural edu</th>
<th>Physical edu / sport</th>
<th>Arts (theater, dance)</th>
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<tr>
<td>Sensitive zone</td>
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What do you think are the “sensitive zones” that are the key issues of this critical incident?  
Disability, verbal and non-verbal communication

**Culture of the person experiencing the shock**  
What are the cultural reference frames of the narrator of the shock that may have played in the shock experience?  
Female / Woman / Italian, Turin - Egyptian, Alexandria / Age 28 / Heterosexual / Able-bodied / Dancer / Unmarried / No children / Had long term volunteering experiences abroad /

**Culture of the person “causing” the shock**  
What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience?  
Disabled / Dancer / Female / Italian

### Describing the SITUATION

I was an observer in a situation that involved two women in a belly dance workshop. The incident took place five years ago. There were a lot of girls in the class. One girl had a special attitude: her left leg was smaller and shorter than the right one. She wore a left shoe with a higher heel. Of course, at the beginning of the lesson, when she entered the dance hall, there was a sort of embarrassment among the others. I am sure all of us thought: “how the hell is she going to dance?!”. At some point the trainer proposed an balance exercise and the girl took more time and effort to perform it because of her disability, but she kept on trying, as all of us. The critical incident happened when a girl made fun of her with another friend. She said something like “Where does she think we are? in a rehabilitation hospital?! ah ah ah”. The lesson reached the end. Once in the changing room, the disable girl talked to the girl who made the joke and told her: “if disability exists, it exists in our minds, not in our bodies”. I am sure the other girl felt very embarrassed!

1. **Elements of the SITUATION**

   **What happened:**
   Among a belly dancer workshop, two participants have made a made an offensive joke on another participant with a disability.

   **Where did it happen:**
   At a belly dancer workshop, in a room with the trainers and other participants at this workshop.

   **Who were the protagonists:**
   (i) The narrator as an observer of the critical incident participant at the workshop  
   (ii) A disabled women attending the workshop  
   (iii) Two others participants able-bodied

   **Was there any history between them (personal or cultural):**
   None of the group knew the disabled girl before.

2. **EMOTIONAL REACTION**

   The feelings of the narrator changed throughout the workshop: when she first saw the disabled girl she felt
pity for her and even doubted her performing capacities a little bit. When she saw her dancing, she was positively impressed and curious. Then, when the other girl told the joke, she found it so stupid and improper, that she felt angry at them and pitied to the disabled girl. Then, when they were in the dressing room and she came back with that statement, she felt so proud of her and afterwards she developed a new perspective towards disability.

3. What norms / values / representations did the incident touch / threaten / question in you?

| Disabled people do not have the same possibilities than not disabled people: | The statement the narrator made affected her a lot. It made her reflect on the fact that a person that we consider disabled, has actually the possibility to do whatever he/she feels like, but with a different ability. In the case of the critical incident the girl knew that she could dance and she did it - so we have to treat her as we would treat anybody else. In the critical incident the narrator had first the idea that disabled people do not have the same possibilities than not disabled people. |
| Dance and body esthetic: | The disabled body or differently-abled body has been largely absent from theoretical discourse on the body. Probably because in a society that idolizes a full and completely artificial conception of bodily perfection a disabled body is not seen as chic, sexy or fashionable. The disabled body too transgressive and deviant destabilize and disturb notions of the classical body and disrupt the idea of an organized body. In the critical incident the body issue is even emphasized by the context of the belly dance workshop. The body is the main instrument in the art of dance, and especially belly dance. |

4. Based on the analysis of question 3 what image do you have of the other person?

e.g. positive, negative, neutral, bizarre etc.

| e.g. positive, negative, neutral, bizarre etc. | At the moment, the narrator had a neutral image of the disabled girl. She is a person like everybody else, with her peculiarities, not with a disability as if this was a negative attribute of the person, everybody has its own peculiarities. |

5. What could be the norms / values / representations of the other person / culture that led to the specific behaviour that caused the shock experience? (Hypothesis)

| e.g. positive, negative, neutral, bizarre etc. | The other girl represents the common conception people usually have of disability: a characteristic which categorizes the person with physical or mental disability as inferior. The approach of the capacity of a disabled depends on the way we are educated, where disability corresponds to a social disadvantage. Lack of knowledge lead to think that these people cannot have the same chances as people without a disability. |
| Competition with our-self and not with others: | In the critical incident the girl with the disability herself, had the image that people living with a disability have the same possibilities as people without a disability. There able to do the same things. Maybe not in the same way. But it’s like all people: everybody has his weaknesses and strength. The fight for disabled is first with themselves to show their capacity against stereotype and limited acceptation of their capacity and body. |

6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?

| Nowadays it is very rare to see a disabled dancer. This rareness is not right and it is a social discrimination. The narrator has practiced dance at a professional level and she can firmly say that dance can be practiced by everybody. Dance is a way to express yourself, what you want to say through your body and your personal capacity. So everybody can do it. And it’s not only with dancing that people with a disability are discriminated. This example gives a good view on the discrimination of people living with a disability, but there are many more fields where they are discriminated. Fe: Finding work: For people with a physical disability it’s often very hard to find work. They have the same capacities as people without a physical disability, but for them it’s much harder to find something, in spite of they don’t have a mental disability. |
**Name of organisation:** European Centre of Studies and Initiatives (CESIE)  
**Country:** Italy  
**Date of recording the critical incident:** 21st of March 2012

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<th>Professional domain</th>
<th>Gender</th>
<th>Health</th>
<th>Sexuality</th>
<th>Support for people living with disability</th>
<th>General intercultural</th>
<th>Physical edu / sport</th>
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**Sensitive zone**

What do you think are the “sensitive zones” that are the key issues of this critical incident?

- perception and treatment of handicap in different subcultures

**Culture of the person experiencing the shock**

What are the cultural reference frames of the narrator of the shock that may have played in the shock experience?

- Sicilian / Female / Woman / Age 31 / Heterosexual / able-bodied subculture / Studies in political science / First working experience with people living with disability / baptizes as Catholic Christian but living atheist / unmarried / pregnant.

**Culture of the person “causing” the shock**

What are the cultural reference frames of the interlocutor of the narrator who is at the source of the shock that may have played in the shock experience?

- Italian / Male / Age 45 / Disability subculture

### Describing the SITUATION

In 2007 I supported, as an educator, people with cerebral palsy in their daily lives. One day, in the beginning of my volunteering period, I went to the Bank with Michele, a fifty year old man in a wheelchair, with serious difficulties in movement and very little speech. He wanted to take some money to go shopping, and we went to the bank’s front-office. After a long queue, the bank officer gave us the money and asked for a signed receipt. Because of his, Michele was not able to coordinate the movement of his hand to sign, and I didn’t know what to do. I was very confused and worried, looking for a solution. In the meantime Michele was not showing any concerns and held out his hand to me. So I decided to take his hand and guide him in signing the receipt. I tried for a long time, Michele kept complaining all the time, and both of us were very tired. After up to ten unsuccessful tries, the bank officer came back to us asking what we were doing. When I explained my efforts in helping Michele sign he started laughing. He explained to me that Michele was used to sign the receipts with his fingerprint, and for this reason he held out his hand to me. I realized that I had focused my attention on the problem and not on Michele’s non verbal suggestions. I realized the difference in the conception of the body and in the different uses of it. My assisting approach towards disabled people was far away from Michele’s expectations. My approach towards disabled people, focusing on their limits (in this case the incapacity to sign in a traditional way) and not on their resources.

### 1. Elements of the SITUATION

**What happened?** Where did it happen? Who were the protagonists? Was there any history between them (personal or cultural)? Try to be as objective as possible.

**What happened:**

A volunteer accompanied a disabled man at the bank office. She is confronted to the impossibility to make him sign a receipt because of his handicap. She will realize later that the man was use to sign with his fingerprint.

**Where did it happen:**
In Palermo, Italy. The critical incident take place in a bank office, with people around and waiting making a queue.

Who were the protagonists:
(I) a volunteering educator with little experience with disabled people and
(II) a disabled man.

Was there any history between them:
The two protagonists had met a couple of times, but they were never involved in activities together before. They are both from Italy

2. EMOTIONAL REACTION

How did you feel in this situation?
The narrator felt frightened by his physical communication and because I didn’t know how to handle the situation. She felt stupid because in the end his communication was very clear.

3. What norms / values / representations did the incident touch / threaten / question in you?

non verbal communication
The body concept and its infinitive capacities seen by the narrator was threatened and consequently updated.

The level of capacity and autonomy of a person is perceived according to the social common reference of able-bodied persons. The adaptation by the abled-bodied of different ways of communication and capacities are excluded. by trying to be in the position of disabled persons is difficult have at first when for instance the social standard of verbal communication is not present.Trying different things instead of keeping with one solution doesn’t help to solve the problem. Alternatives in handling are important.

In the case of the critical Incident the problem of communications has been even more increased because of the context (in a bank, with people waiting...). The social pressure, for the narrator because of the other’s opinion people and the need of being quick, prevent her to take time to develop a new way of communication and try to understand what the Giovanni wanted to tell her by his gesture.

Assistance-Disabled persons are limited in their actions:
Our society gave us value of providing mutual aid and assistance to the person considered as the weakest. Assistantship can generated negative effect when is not based on complementarities. The “assistant” feels responsible of ensuring all the daily tasks, feels pressure and forget the “assisted” as a capable person by being focus on his duty of rescuer. The “assisted” can develop a dependency to the help provided and not find out the alternative capacities of his body. Furthermore it maintain the “assisted”self-esteem low and limited.

4. Based on the analysis of question 3 what image do you have of the other person?

The narrator had a very bizarre, almost striking fear in herself. After this experience she has the image that Michele, the disabled man is a very high context communicator because his way to communicate is clear when you know how to listen.

5. What could be the norms / values / representations of the other person / culture that led to the specific behavior that caused the shock experience? (Hypothesis 1)

Alternative way of communication:
Disabled personshavetheir own way to deal with disability and therefore to communicate according to their handicap. They develop their own language. However establish a relation and make them understand can be a long process and a real complicity and envy to learn this new way of communication.

In the case of the critical incident, Giovannican participate in daily life like everybody else. He understood that not everybody knows how to handle, but it makes him tired and frustrated.
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<th>6. Does the situation highlight any problem concerning the professional practice, or in general about the respect of cultural differences in intercultural situations?</th>
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<td>It does concern the professional sphere – due to lack of knowledge the narrator was not able to fulfil the beneficiary’s expectations and she didn’t meet his needs, especially in regards of his personal administrative life issue. Communication is important, both verbal as non-verbal. We have to learn to listen to other people and not think that one decision always is the best. Think about alternatives. There is, in general, more need to know more about people living with a disability. Everybody, young or old, dark or white, rich or poor, high educated or low educated, get in touch with this target group. That’s why it’s important that everybody have to know how to handle with them in general.</td>
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