

Nice to meet you!

Disability Studies in the curricula of Universities of Applied Sciences: how to begin and proceed?



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Let's first talk about the WHY

- Health care and social work
- More complexity in health problems
- More diversity in patients
- Dutch government - costs: self-management and self care
- United Nations handicap treaty
- New roles for professionals: person-centred care, working outside institutions, shared decision making

Citizens, patients, clients, care users

- Living with a chronic condition
- Specific contexts
- Taken seriously, acknowledgement of expertise and knowledge: experiential knowledge
- To be seen, heard, listened to

- Blogs, documentaries, movies, and (narrative) research show this is not always the case

Professionals

- Moral dilemma's, uncertainties, not knowing how to, disability focussed
- Consequence: using The Words, without content, e.g. 'using experiential knowledge', little depth, now and then;

“It is difficult to put aside one's own presuppositions”

“I am focussed on solving problems



The problem

A lot of professionals feel the gap between wanting to work more person-centred and the knowledge and competences to be able to, patients too notice this

Sometimes professionals are unconsciously unable

Current paradigms still lean on epidemiology, scientific evidence, medical sciences, guidelines

That is:

the influence of the context and individual is reduced to be able to find the strongest evidence...

A need for

Working from other paradigms in which roles and certainties change: new knowledge, reflective skills, changing attitudes & co-creation



Time for Disability Studies ideas

How to start and if you already did so, how to proceed?

Round table

To share experiences, dilemma's and future dreams with regard to Disability Studies in the curricula of Universities of Applied Sciences

I know: Note experiences you recognize

I think: Note ideas and solutions that come up

Conclusions and directions

