

UCM RESEARCH FESTIVAL

Ella Magee and Mike Roberts

A Paradigm Shift Required in Celebrating Our World

How We Scaffold Learning For Today's Young Minds
of Differences



Pre appreciation.

Unconditional
positive regard.

Assume good
intentions.

Be fertile ground.

Moving away from the medical model and celebrating difference



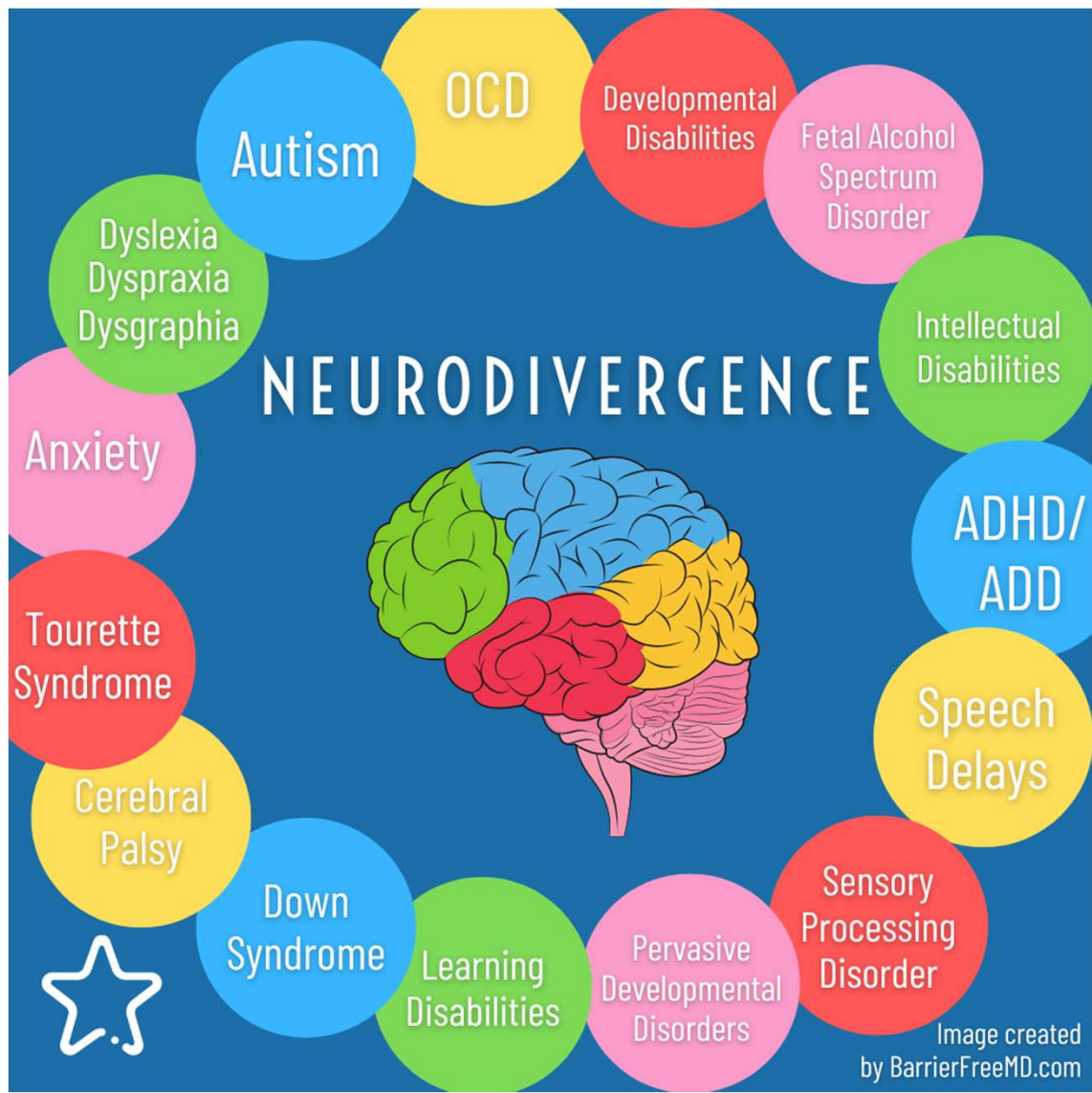
Removing Barriers.edu. Illustrations by Ella Magee

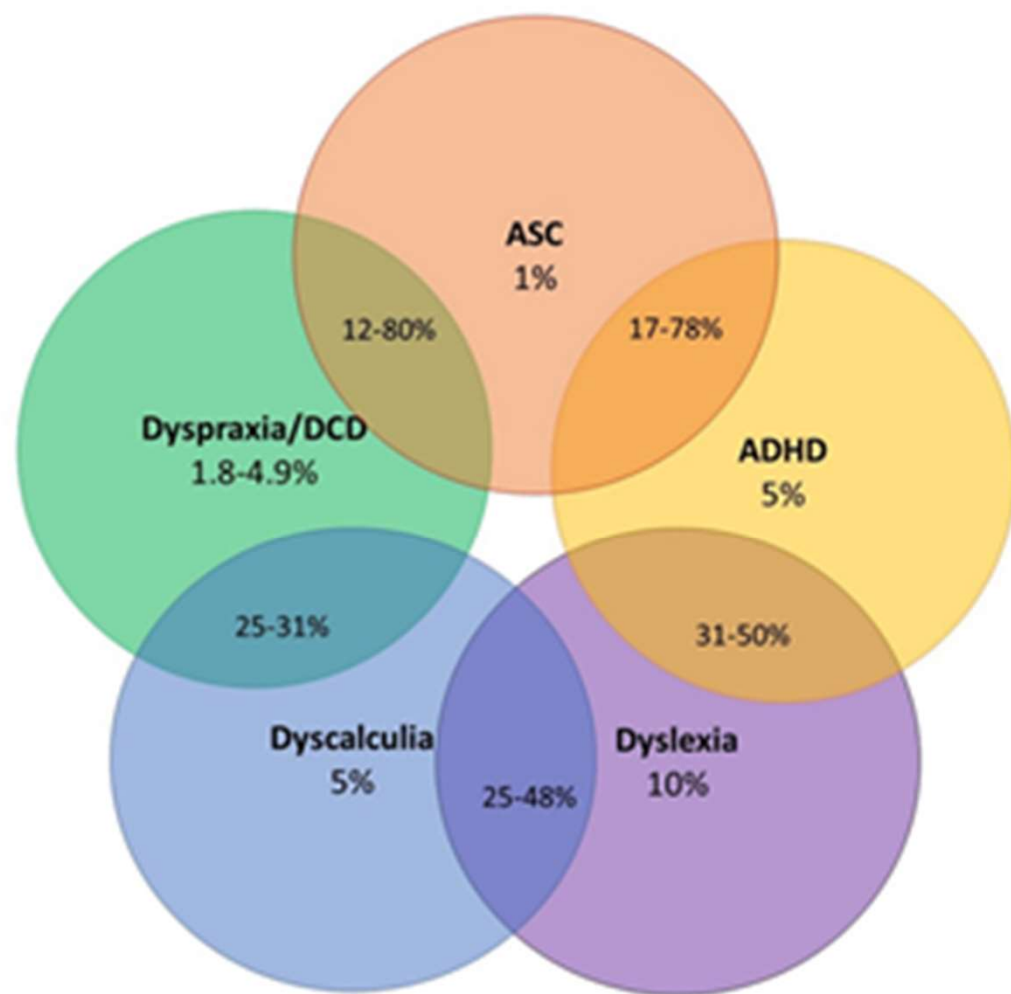
Deficient?



Whose system?








Co-occurrences of Neurodiversity (general population)
(Kirby and Cleaton 2019)

Neurodiversity/ dis/ ability...

- How do you view it?
- What do you know?
- Where does your information come from? Media- 
- What message are we sending about disability?
- Do we challenge stereotypes, prejudice and discrimination? What are your bias/ prejudice?
- What is ableism and does it exist in your schools? In your teachers, your students? In your classrooms?

Media- relationship to dis/ ability

LGBTQ
Black
female
Muslim
Chinese
over 70

- Observer, Michael Savage- 'Employers should see autism as asset': review seeks to break barriers at work. A review attempting to identify and tackle the barriers autistic people face at work is being launched by the government, in an attempt to push companies to "reap the benefits of the neurodiverse workforce." *reciprocal relationships?*
- Have we heard this before? With what other protective characteristics?
- What role does media play in generalising us? How dangerous is that? What would a more helpful article include?

~8% of people in the UK are thought to have ADHD.

~10% of people in the UK are thought to have dyslexia.

~8% of people in the UK are thought to have dyspraxia.

~6% of people in the UK are thought to have dyscalculia.

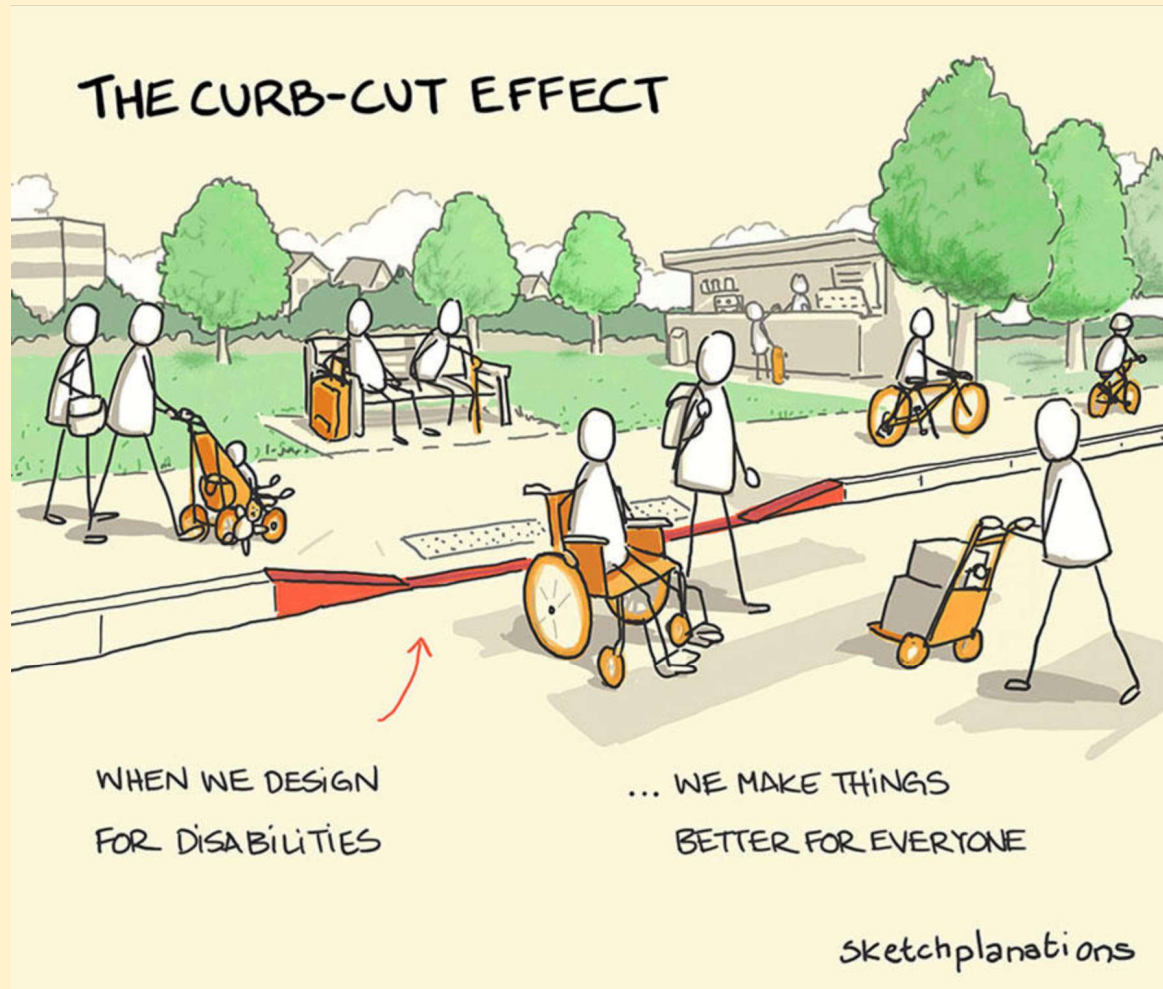
~1% of people in the UK are thought to have an autistic spectrum condition.

~1% of people in the UK are thought to have Tourette's syndrome.

Society
frameworks and
unhelpful
environments.

<https://youtu.be/kmAfpmGO7DU>

Medical/ social model explanation: a film by Creative collection for NDACA.



Blackwell AG. [The Curb-Cut Effect](#)~~Exit Disclaimer~~. *Stanford Social Innovation Review*, 2016. doi:10.48558/YVMS-CC96.



Problematic?



FOCUS?



Follow one / child
until Success



Abracadabra



Focuspocus

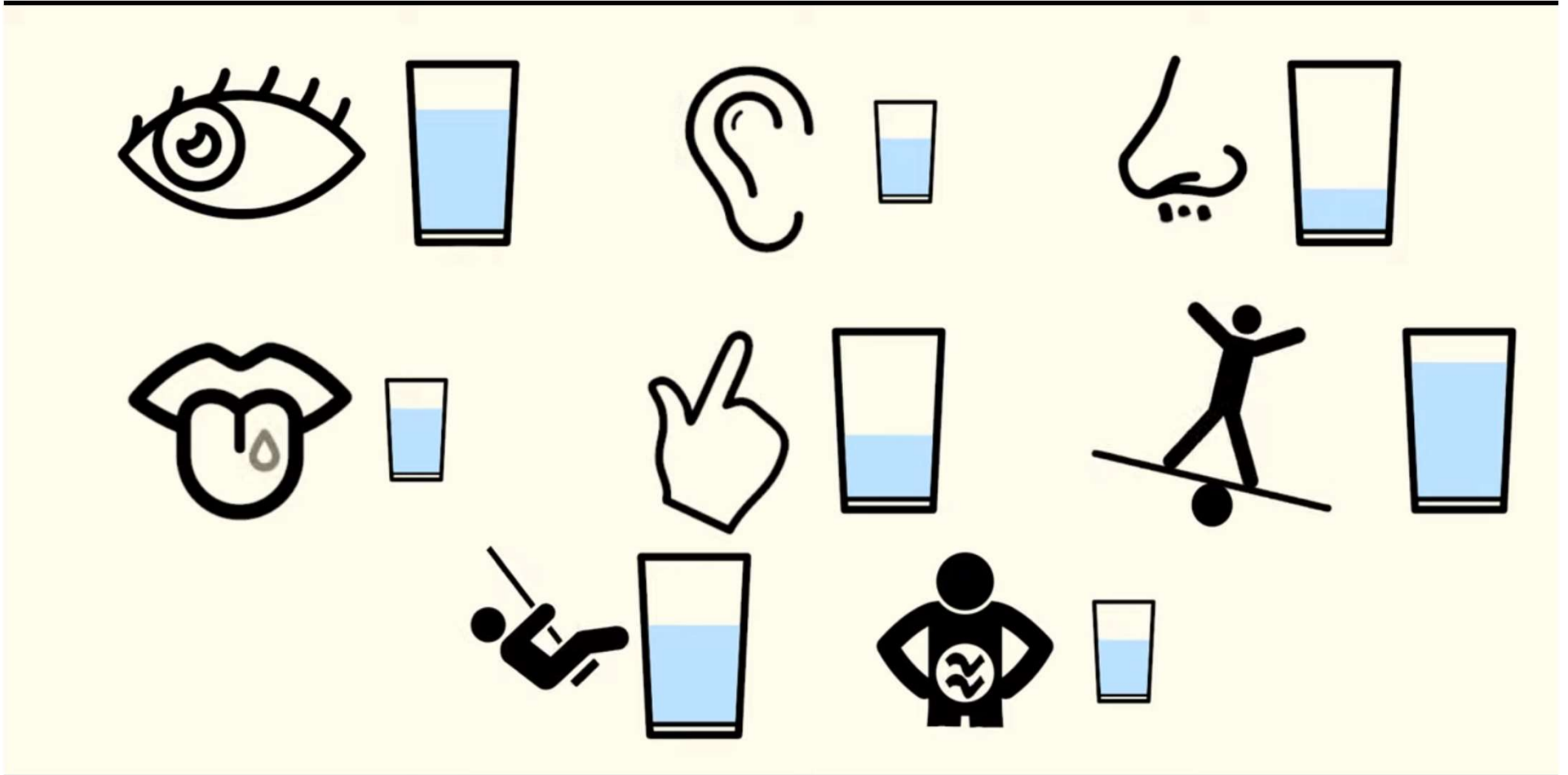


Environment- and our senses Dr Tim Culbert

Regulation/ disregulation and Interoception receptors- somatic markers in the body operate on a subconscious level- this area of study is the fastest growing in Neuroscience and psychology at the moment. Our internal organs are communicating to our brain all the time

- Sonic
- Sight
- Touch
- Taste
- Smell
- Pain
- Itch
- Temperature
- Kinaesthetic
- Balance
- Chemical
- Hunger
- Thirst
- Time
- Direction
- Intuition
- Emotional
- Energetic
- Electromagnetic

• <https://youtu.be/V-kUKyfu0as>



Our senses- stimulation. Overwhelm. Lack of feeling is also to be considered.



What would a social model school look like?

Everyone is neuro-diverse

Niche Interests

Quiet places

DEI in Curriculum

NO MASKS!

Teaches students to practice Inclusion

Brain Breaks

Learning about how the brain works

Strengths and weakness interventions

Everyone is celebrated

movement





© Exploring Building History

Temple of Concordia, Agrigento, Sicily



Lou Ruvo center for brain health ©images.search.yahoo.com



Examples of defensive architecture- spikes so you can't sit and rest. Armrests to stop homeless people laying down



Sarah Ross, 'archisuits. 2005-06



Sarah Ross, 'archisuits. 2005-06





In the theory of shame resilience, Brown outlined four key elements:

- Recognizing, naming, and understanding our shame triggers.
- Identifying external factors that led to the feelings of shame.
- Connecting with others to receive and offer empathy.
- Speaking about our feelings of shame with others

Benefits of teaching about Neurodiversity

Benefits?

- Less school Counselors required
- Less bullying
- Better grades?
- More social awareness?
- Less addiction?
- Less need for money to be spent on Healthcare, due mental health issues
- Less emotional dysregulation as adults?
- Reduced suicide?
- Increased connection?
- Less masking
- Authenticity
- Maximising on unique natural talent
- Hyper focus and niches interests
- Less need for social services
- Less need for money to be spent on Healthcare, due mental health issues
- Is this a more ethical approach?
- Stigma free
- Judgement free
- Reduced eating disorders

Fears?

-
- People using ND as an excuse? (Disproved, everyone wants to feel valued, respected, accepted, connected and feel they have a purpose).
- Inconvenience?
- Funding?
- Time consuming?
- Fear?

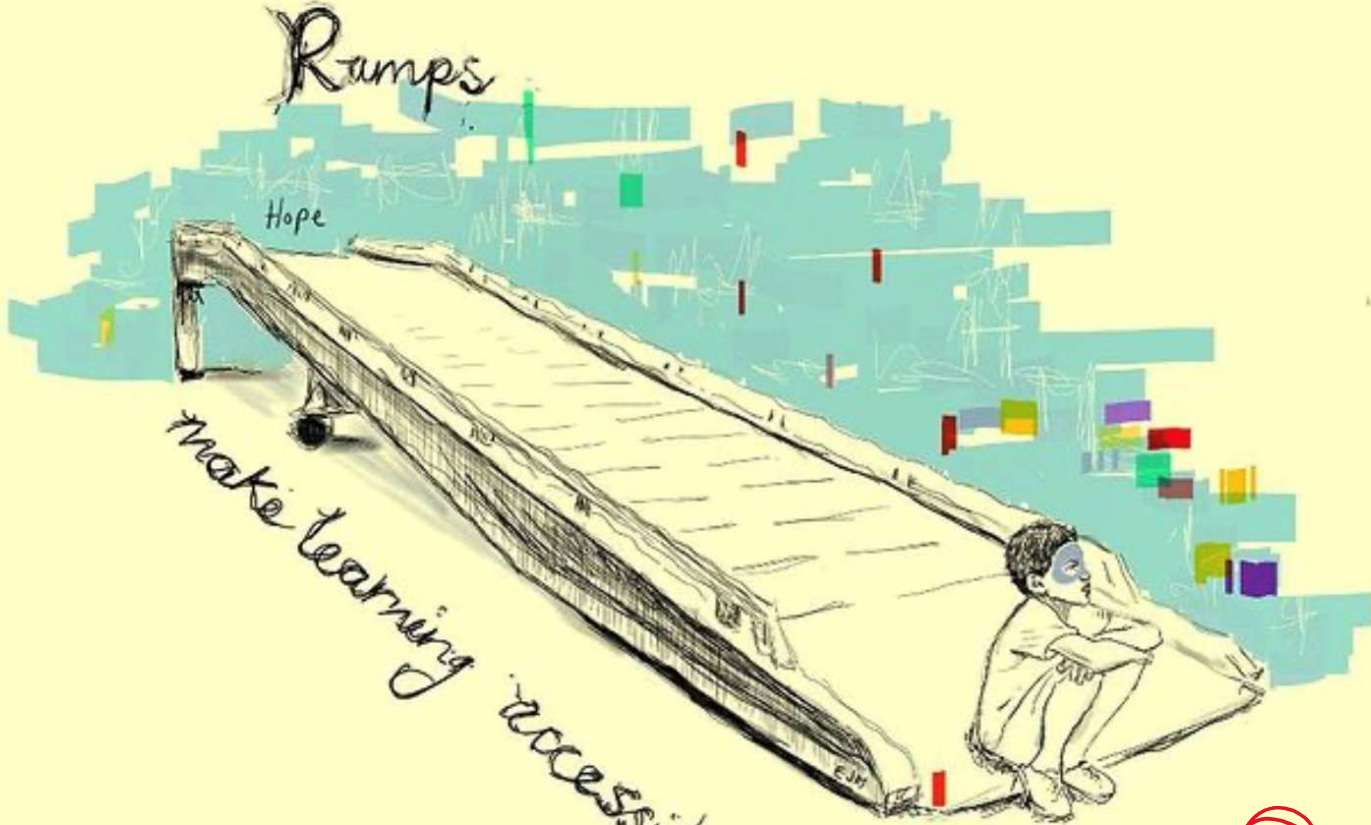
What needs to be done:

- Greater awareness and knowledge of ND
- Change the environment physically and mentally so it is physiologically safe- (LASER)
- Add DEIJ training into the curriculum
- Always be aware, observant and alert to patterns of behaviour
- Find out what each student's greatest successes are and their biggest failures.
- Create choice and be creative with how you deliver your lessons
- Get to know your students, we are ALL different, even Neurodivergent people.
- Look beyond the diagnosis.
- Name the shame
- Create great ramps
- Teachers remove your masks

Ramps

Hope

make learning accessible



What good is an idea
if it remains an idea?

Try.
Experiment.
Iterate.
Fail.
Try again.

Change the world.

@simonsinek

Thank you for listening.

If you are interested in training or have any further questions don't hesitate to get in touch.

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