CRUcial Times

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CRU MISSION STATEMENT

To challenge ideas and practices which limit the lives of people with disabilities.

To inspire and encourage individuals and organisations to pursue better lives for people with disabilities.

EDITORIAL

The re-emergence of hope. Let's hope its not too late!

Beverley Funnell

The first time I sat down and listened to a small group of parents talk about their experiences of having a child with a disability, I cried. It wasn't pity. I was moved by their great tenacity and courage, and felt connected through our shared love for our children.

One family told me that, on the occasion of their child's birth, they did not receive a single congratulatory card. My heart tightened as I made a quick mental comparison. I pictured the box full of cards and gifts in bright wrapping as I recalled the sweet memory of the most wonderful time in my life.

Another mother spoke of her daughter who had undergone neuro-surgery eleven times by the age of five. As a country-family, hospitalisation of their daughter meant a journey of one-thousand kilometres each time. Being so far away from their own family network made it impossible for them to have someone present to watch over their daughter every minute of the day while she was in hospital. This was a great anxiety because the mother was convinced that her daughter's recovery and wellbeing were, to a large extent, dependent upon the quality of care she received from nursing staff. She had made the observation, in relation to other child-patients, that those children whose mothers or fathers spent a lot of time in friendly chat with the nurses (often bringing flowers and sweets), were the children who appeared to get more consistent and conscientious care.

What this parent had discovered deeply offended and grieved her but she had decided to play the game in the interests of keeping her daughter alive. Aware of what was going on, the mother became a reluctant participant, trying all the time to disguise her deep disapproval of such an insidious culture. Whether the nursing staff were conscious or otherwise of their actions is not clear. What is of great concern here is that these children, with medical and other disabling conditions who are so vulnerable in hospital as they are in life, only seem to gain access to good treatment and care through the niceties of their parents. It is as though the children are deemed to be unworthy recipients in their own right. ➢

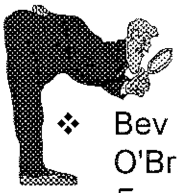
It may be very difficult for some people to imagine what it would be like to know that their child is unappreciated and not liked. To constantly see and hear people with disabilities being portrayed and described in demeaning and insulting ways must surely pierce the very hearts of parents. Although the words and actions of insensitive people may be expressed in negative generalities, such as references to "the disabled", these actions personally wound and undermine the reputation and dignity of every person with a disability and their family. For some parents, sustaining hopefulness and a belief in the inherent value of their relative becomes too difficult, and at some point the bad-press about people with disabilities comes to be believed about their very own loved family member.

Given the lack of appropriate community supports and the low expectations held by our society about people with disabilities, this outcome is not surprising. Although expressions of love may continue, the belief that a good life is possible gradually becomes extinguished. This loss of hope occurred for some families when they had no other choice but to have their relative institutionalised. Without hope, the oppression and neglect of people in institutions gradually becomes "tolerable". This neglect and disregard for people's humanity becomes distorted and re-interpreted as some sort of saintly devotion heard in expressions such as: *aren't the staff wonderful - they deserve medals, I couldn't look after them!* These expressions actually perpetuate the view that people with disabilities have nothing to offer. Even where systems are blatantly abusive there is an expectation that parents should be grateful - grateful that it isn't worse.

Hopefulness has not completely died, however. In fact, it is being resuscitated day by day. We are witnessing a re-emergence of hope as parents and family members across Queensland decide to assert their natural authority, based on their relationship, love and knowledge of their family member. Increasingly families are wanting a real life beyond institutions for their relatives. Many parents have stopped trying to defend institutions, and instead, have embarked on a genuine search in order to make community-living a realistic and achievable goal.

Ironically and sadly, this is what most families had asked for in the very beginning. Families didn't create institutions. In almost every situation, families wanted support and assistance for their relative and themselves where they were already situated. This was not forthcoming and here we are again - families with and without the experience of institutional life still wanting realistic and dignified community supports.

The expectation that families should always be grateful for what service systems do for their relative is wearing thin for a growing number of these families. Ninety-nine percent of parents and family members are ready to acknowledge the value of competent staff and responsive service systems, but more and more of these families are no longer willing to turn a blind-eye when the reality is otherwise. They now know that a denial of what is actually happening for their relative has a high cost. It is a cost that many families are no longer prepared to meet because they know it is their son or daughter who pays with a wasted life. ■



CRU Highlights of the past few months

- ❖ Bev Funnell, Rosanne Ott and Ann O'Brien have been working on *Focus on Families* - a project supporting families of Challinor residents who are considering or seeking the opportunity to make community-living for their relative a realistic and achievable goal.
- ❖ CRU's third leadership program concluded in June. Fifteen people from Toowoomba, Rockhampton and Gympie

areas completed a 12 month program to develop their leadership in the disability area.
- In far NQ a group came together for a three-day *Care of the Leaders* retreat to renew their leadership and to connect with others throughout the north and north-west of the state.
- As part of *Series 96: Key Challenges*, Michael Kendrick has presented workshops on leadership and quality in human services in Rockhampton, Brisbane, Toowoomba and the Sunshine Coast.
- With the support of people from the north, a successful reflective SRV event was held in Townsville. As well, an introductory event was held on the Sunshine Coast.
- Anne Cross, with staff and others, has undertaken evaluations of a family support agency, an accommodation service and an employment service.
- CRU continues to be involved in an exciting pilot project to support two young women with very high support needs to gain employment.
- Bev Funnell is working with ARAFMI (a family and carers support and advocacy group) in planning and review .
- Agency support by CRU to several small and medium-sized agencies has included staff training, review and planning, policy development and committee development work.
- CRU library resources continue to grow and are popular with users throughout the state.
- CRU staff and committee have been doing our own review and planning for 96/97. Reflecting on various elements of CRU's work has been challenging, interesting, exciting and daunting!

From the President's Desk

In these times when uncertainty seems all-encompassing, when the fabric of society is brittle, and religious and moral values are on the decline, we simply must find within ourselves the strength to carry on and keep pushing forward. This cannot be done unless we are able to exercise hope. Hope was once described as the inner dynamic that compels us to explore and pursue the expectations built into the human condition. It could also be said that HOPE was born the day human beings discovered the first bridge and decided not to jump off the bridge in despair, but to cross it. I believe that hope is located in the essence of our being. It is fundamental to our existence; it is part of our very humanity. Hope reaches beyond ourselves to a power beyond us. The poetry of Helder Camara expresses this well.

Hope without risk
is not hope,
which is believing
in risky loving

Trusting others
in the dark,
the blind leap
letting God take over

I also believe that in first drawing on the hope and strength within our own being, we then need to draw on one another's hope and strength, a belief that also finds expression in Camara's poetry.

If only we would stop dividing ourselves,

If only humanity would stop producing and stockpiling the arms that some day will probably obliterate human life.
If only we could see that in place of all this fear and anxiety, in the most difficult and dark hours, in the darkest night, a star shines.

If only we, as brothers and sisters in greatness and misery, could find again a spark of hope.

A great deal of this edition is devoted to the spirit of hope and the need to sustain it in ourselves and in each other.

Best wishes, *Mike Duggan.*

The work of Helder Camara is reproduced, with permission, from the book *Hoping Against All Hope* © 1965, Harper Collins

What Did It Take?

Catherine Raju

What does it take for the family of a child with profound and multiple disabilities to feel able to continue to care for their son or daughter at home? This is a complex question which touches on unquantifiable variables such as an individual's personal belief system, a family's network of support, the differing abilities of people to deal with shock and grief as well as the coping abilities of people in general, and the nature of a relationship between husband and wife.

It was, however, on the important aspect of practical support that this question was posed by a small group of workers in the disability field back in 1988. Working with a group of parents of children who had very high support needs and challenging behaviours, they had struggled for some time with the question, "what does it take to keep a child in his/her own family?". The danger they could see for these families, and especially for their sons and daughters with disabilities, was that institutional care (either full time or on a respite basis) was really the only kind of extensive support available. At that time there were no HACC funded home-based care programs available in Brisbane and the whole notion of flexible family support packages was not even on the service agenda. Community based residential respite houses had long waiting-lists and were generally able to offer no more than two or three weeks each year to those families lucky enough to be on their books. These families had been reluctant to consider that they may no longer be able to care for their children at home but, as the years wore on with no sign of adequate support being available, the danger of institutional life for their children was becoming more and more real, even if this was not overtly spoken about.

This was the background for the beginning of the Enhanced Care Association and the respite house at Stanley Terrace. Our family was lucky enough to be involved in the early discussions around this question of "what does it take?". Eight years later, we look back and realise that our lives and the lives of the other families involved are very different from what might have been.

The story of how it all happened is a long and detailed one, but one that deserves to be told. It would be an interesting exercise to look at the many years it took for the service to be funded; the work done on developing a vision-statement for the association; the role played by the people who supported the families; the decisions taken about applying for sponsorship (and then deciding to become incorporated and to manage the service ourselves); the positives and negatives of a consumer-managed service in terms of outcomes for families weighed against the amount of work involved in management; and the frequent difficulties experienced at a committee level when the consumers of a service are also the managers. There is a time and place for this history of Enhanced Care Association to be written but another story to be told is that which relates how each family was involved and how life changed for them and their children. For each family the story is different but the main aim was that the children stay with their families and, in each case, this goal was achieved.

For our own family, the danger of institutionalisation of our daughter was not entirely imminent because she was younger than the other children involved. For us, the danger was in the fact that we were using a nursing-home to supplement the amount of respite care we were able to access from a community house. We were conscious that using the nursing-home was insidiously eroding our confidence in the ability to care for our daughter at home. The relief of a good night's sleep was invaluable but we were highly aware of the danger of seeing this type of arrangement being extended from one night each week to two, and so on. It was seen as "easy", "sensible" and "practical" by some people around us. We knew, however, that it was a dangerous arrangement if we were determined to keep our daughter at home with us. We believed there had to be some other way to cope with the difficulties without having our daughter move away from us. ➢

Our first priority was for some practical help at home. The notion of home-based respite or in-home care was new to Queensland at the time, even though it was working well in other states. Our second priority was for a residential model of respite care on occasional weekends, enabling us to have a good night's sleep every now and then. Our own need for a house-style model was a need also being expressed by all of the other families. To have our sons and daughters stay in an ordinary house in the community with a small number of other children and regular staff who were well-known to us and our children, was seen as a far more positive experience than time spent in a nursing-home, in many different houses, or than for our children to live permanently in an institution.

Eight years down the track, it may now appear that we had been rather limited in our vision of family support. It may also seem sad or shocking to some people that seeking care outside the family was a top priority. It must be remembered, however, that many of the families were then very close to having their children placed in an institution. It seemed enough, for a while, to be able to move from that feeling of hopelessness to one of relief at having found an alternative which was kinder for our children and over which we had more control. It must also be remembered that there were very few good models of family support at that time. Now when the question "what does it take?" is asked, there are many more ideas suggested and parents are generally more able to voice their hopes of what might be.

As a service which is managed and directed by families, Enhanced Care Association has developed over the past eight years to respond to the changing needs of families as they move through different life-stages. Options for families now include home-based support and recreation hours as well as time in the Stanley Terrace community house. We have the support of staff who have come to know our sons and daughters very well over the years. Along with us, they see our children growing up and realise that the way our sons and daughters spend their time with us (and away from us) will continue to change over time. We have recently undertaken a full review of the service and look positively towards the future as we explore other possibilities for a more truly flexible family support service. We are fortunate that the nature of Enhanced Care Association, a small organisation meeting the needs of a small number of families, allows us to develop in this way.

The circumstances described at the beginning of this article are no different from those of many families at this present time, in spite of the eight years. There are certainly a few more options available in terms of home-based care, recreational programs and a few more respite houses, but there are still families who receive no support as well as long waiting-lists of people trying to access existing services. We hope that in the same way that we, in the association, were inspired by stories of what was happening for families in other countries and in other Australian states, families today may find the stories of Enhanced Care and other similar organisations useful in their attempts to make a difference for their sons and daughters.

The CRU team was recently joined by Silke Collisson, who will provide administrative support to CRU's executive and financial operations. Silke was born and educated in Switzerland, has travelled extensively, speaks several languages and was employed by Greenpeace for five yeas. Silke, who has recently settled in Queensland with her partner, says she looks forward to making a contribution to the community. Welcome, Silke!

Committee Members 1995/96

Mike Duggan (President)
Alf Lizzio (Vice President)
Gayle Richardson (Treasurer)
Rex Newsome
Janet Millward
Judy Brown
Patti Dietz

Staff

Anne Cross	Director
Pam Collins	Resource Consultant
Silke Collisson	Admin Officer
Beverley Funnell	Consultant
Melinda Rio	Admin Officer
Margaret Rodgers	Leadership Prog Co-ord
Jane Sherwin	Consultant & Educ Prog Co-ord

Project Staff

Rosanne Ott
Ann O'Brien

THE NATURAL AUTHORITY OF FAMILIES

Michael Kendrick

With great regularity, consumers of services and their families will find themselves having to confront professionals, bureaucrats and others in roles of authority. Not uncommonly the authority of these persons tends to overshadow the authority of "small people". It can sometimes help to remember that families have a natural authority of their own which can go a long way to reducing this imbalance of power and authority. In order for this to happen, however, families need to appreciate this natural authority and be willing to act on it. What follows is a brief description of some of the common sources of authority that families can call on when they are acting in the interests of a family member.

1. The public generally recognises the primacy of families in terms of their responsibility for a person's wellbeing. In this way, families have the authority to be highly engaged because they also tend to have greater responsibility for the wellbeing of their family members.

2. Families have authority (normally) arising from knowing their family member the most fully and over the longest period of time. In this way they have the authority that arises from long term observation, insight and personal relationship.

3. Families typically care about or love their relative more than would be true of others, however committed the others may be. Not only do families usually care more but they are also expected to care more .

4. Families have a stake in outcomes. For example, they have to live with the long-term consequences of service failures to a greater extent than any other party, except the person themselves.

5. Families are expected to advocate for their own members. Not uncommonly, they are granted considerable presence in the decision-making processes affecting their family members, even where legal formalities do not require it.

6. The family is an authoritative witness to the performance of professionals and systems and may have special (though not necessarily exclusive) insight into events that take place.

7. Family members bring to their role a wide range of talents and experiences which can give them additional authority on many matters. For example, a parent might also be an expert educator.

8. Families are often best positioned to see how everything, in its entirety, adds up in a person's life. For this reason they can often see the incongruencies of different interventions.

9. Family members are often free of the vested interests which call into question the credibility of other parties. Frequently family members are granted a degree of independence which highlights their credibility and purity of motive.

While these common sources of authority do not, in the end, resolve the question of ultimate authority, they do offer families some measure of security that their views should matter as much as, or more than, others who also claim authority in deciding what will happen to a person. Because it is very difficult for a person to advocate if they hold some doubt about the legitimacy of taking on the role, these points may help to strengthen the resolve to hang-in-there and advocate for your family member. ■

Could Co-ordination Become Control?

Judy Brown

Many substantial advances have been made for people with disabilities and their families over the past decade or so. A lot more is still needed, but this should not be at ANY cost.

As someone who has been involved in a family support role for the past fifteen years, it has been heartening to see the changes which have taken place. The community at large can now access information and expertise in trying to ensure (for example), consumer-participation, best practice, standards compliance, and needs-based planning. There was a time when there was no clear statement on issues such as acceptable service standards or quality outcome measurements, and when an annual auditing of finances constituted almost all of what was understood by "accountability". I recall one very large organisation which provided a multiplicity of support programs, but whose management proclaimed to a new and unskilled liaison officer that their main role was *fundraising.*

These days there is a greater culture of accountability in organisations. Workers at all levels are better informed about quality outcomes and how to measure them. There are standard approaches to substantiating needs in funding applications, parents and adults with disabilities are involved in information-forums and there is a growing recognition that families themselves know their own needs. We have indeed made progress.

Along with this sense of satisfaction about progress, however, I feel some concern. It is about the extent to which initiatives are increasingly driven by government, where once the community took the lead. Community profiles, for example, used to be developed from the community and appended to applications for funding in order to substantiate need. In other words, information was fed upwards from community to government. Today, there is a tendency for the community to learn about itself through a top-down approach. Profiles are provided *to* communities. Similarly, inter-agency meetings are often chaired, minuted and called by government officers. In no way am I suggesting that these meetings should not take place or that a certain partnership with government is not essential, but I have a concern about the extent to which the community seems to have let go of the reins.

My concern is about clarity of role rather than about polarity of players. While there does need to be a healthy working relationship between community and government, I am deeply concerned about a blurring of roles which leads to an erosion of the primary role of community organisations in representing consumer-families. For example, will community services continue to protect the privacy of families or will they be co-opted into the role of economic rationalist where economic systems have primacy over social systems? Will community services continue to support families who, for their own legitimate reasons, want to be able to choose and access more than one support service or even to choose a service that is not geographically close to them? Could co-ordination actually become control?

We do need to work together towards increasingly better life opportunities for people with disabilities and we need co-operation between all the players but we also need to be absolutely clear about our respective roles and our primary responsibilities. ■

CRU'S EDUCATION & DEVELOPMENT PROGRAM

Co-ordinating CRU events over the past few months has been a busy, but exciting time. As readers would know, the *Series 96: Key Challenges* sequence of workshops and lectures is well under way in Brisbane, Toowoomba and Rockhampton. Many people have taken the opportunity to attend the series on human service quality and leadership which are being conducted by Michael Kendrick and some of the participants have shared their experience in this edition of *CRUcial Times*.

As well as widely offering these events throughout Queensland, CRU has also facilitated a number of opportunities for other groups and agencies to have access to Michael's expertise and wisdom. Michael is especially valued for his outstanding ability to bring clarity to complex issues. His dry sense of humour is also appreciated as well as the fact that he is not fazed by PA systems that buzz during presentations, or even by my introducing him as "Malcolm" in one of the workshops. He is a pleasure to work with.

Peter Millier and Anne Cross led a very successful SRV Theory event in Townsville during April. CRU decided that this SRV training should also be a "reflective" event, as most participants seem to enjoy and benefit from an opportunity for reflection and discussion.

Watch for information on the next two workshops on INCLUSION. CRU has invited Tony Kelly, who is very experienced in community development, to present these workshops. Anne Greer will also be sharing her experiences at these events. Some of you will know Anne who is from Townsville, is very dynamic, and has a son and daughter who have disabilities.

Anne Cross and Beverley Funnell have also designed a great workshop for those involved in managing community organisations. For years we have viewed community agencies as "the answer", yet their struggles with increasing complexities and demands have gone largely unassisted.

In addition to all these events, there will be two Lunch-Time Seminars in Brisbane before the end of the year. So, will we see you at any or all of these events? I hope so.

Regards,

Jane Sherwin

Three Days with Liz Keane

In March, CRU offered a small workshop in Cairns for people from North Queensland. The invitation said: .... An opportunity for people demonstrating leadership in North Queensland to meet, reflect, and regenerate away from the pressure of day to day life .... Input on topics such as managing change, coping with stress, recognising burnout .... The use of relaxation and meditation ....

We had a great response, and even though torrential rain was added to the usual obstacles that make it tricky to get away for three days, all twelve participants arrived at the Cairns Mercy Centre as planned. The workshop was facilitated by Liz Keane, a Sydney-based professional who regularly conducts workshops on change management, stress and burnout. Some of the participants have written about their experience in the following creative ways, including a poem.

For me, *Care of the Leaders Workshop* came at just the right time. Having been in a position of co-ordinator for a short period of time, I felt that my time-management was non-existent and that I was at the point of burnout. After five months, I really needed time to gather my thoughts and reflect on what had been happening with the organisation. Then along came CRU with just the right workshop, set in rain-forest surroundings - a perfect place for reflection.

Before the workshop, I had been trying to climb mountains (of work) and realised that if I continued the way I was going, I would burn out. The workshop taught me that it is essential to take time for reflection. The workshop also helped me to see why the institutional reform program is so important to me. It helped me come to terms with many issues that I had hidden away in my subconscious. As the sister of a person who had spent time in an institution, I recalled the person who went into the institution and the person who came out. I had not realised until this workshop experience, that I needed to grieve for the sister I lost when she entered the institution.

The workshop has strengthened my commitment to the disability field. I sincerely hope that Care of the Leaders will be a regular occurrence.

Carol Long Mt Isa

Rushed,
tense,
anxious,
headache
Let go,
wind down
hello me!
safe, secure, serene
Challenge,
step back
side track, confuse
seek refuge
Calm strength,
shared search
listen
love, connect
O wise one,
human kind
shine
healing finds it's mark

Jenny Heraghty

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I was recently privileged to take part in a unique three-day group experience in Cairns. CRU provided us with an opportunity to meet with Liz Keane, a renowned professional from Sydney. This proved to be a very interesting and exciting time. Liz taught us how to relax and to make free that inner part of ourselves which lies trapped just below the surface. For me, this was not accomplished without a good deal of emotion when I found my perception of daily life shattered. I guess I realised for the first time just how daunting the task of caring really is. This realisation left me wondering how I had actually managed to keep going. It was very helpful to take time away from the daily routine and to think of ourselves and our own needs, as these seem to become lost in the day-to-day struggle. Liz very skilfully guided us as we became aware of our own deep thoughts and feelings. She was extremely supportive in this process. I now have a better understanding of my own importance and realise that my own needs do matter. It was also fun to be part of such a cohesive group, and to have a chance to get to know people better. I want to express my sincere appreciation to CRU and Liz. Well done!

Deborah Tobin Atherton Tablelands

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When something came in the mail from CRU about "leaders", I though they were probably looking for someone to be involved in yet another project. Not for me, I thought. I'd had enough of leading. I just want to be a foot-soldier. Following a conversation with Frances Carpenter, I somehow turned up at Earlville, shanghaied into going to Care of the Leaders Workshop in a leafy glade close to the rainforest. I looked around the group. I knew most of the group, and all except me were women. I thought "time to go" but my darling wife, Jenny, saw the glazed eyes and said "stay", so I did. The next three days were what had been promised in the flyer from CRU. Day one: a quiet place of my own that would revitalise me. I would gain an understanding of change and why change is so threatening. Day two: the topic of burn-out, the virus that claims so many good people. I knew what it felt like to be a candidate, but with new knowledge, we lost our fear of the beast.

In the quietness of these three days, we talked, rested, meditated and enjoyed relaxing massages. I was fortunate to share my birthday (the big 50) with a group of inspiring leaders from far north Queensland. Because of the support of this group, I returned to work focused, and able to cope better, but I had this nagging fear: once the workshop-fever wore off, would I be back where I started? Well, it is three months later, and I have only one word of advice about the Care of the Leaders Workshop. Go!

Pat Heraghty Mareeba

Quality Explorations with Michael Kendrick

Early in May I attended the first two in a series of five workshops organised by CRU. The presenter for these two workshops was Michael Kendrick, a Canadian now living in the USA and a disciple of Wolfensberger, the originator of Social Role Valorisation theory.

The first workshop dealt with many aspects of leadership and the second dealt with quality. Readers may find useful the following points from my own learning on the topic of Quality.

An organisation must have a strong commitment to service and quality, expressed as an underlying philosophy. The underpinning principles then develop into a culture which, through policy development, choice of personnel and other means is defended from contamination by the "barbarians at the gate".

Personal commitment by all involved is essential for this to succeed. Because individuals may differ on how to achieve excellence of quality, conflict is often inevitable but provided this is positive, it is healthy. It can be found at all levels of the organisation from the coal-face to management.

As the world is not static, it is important that we frequently examine the premise of our work. This may be done formally and informally, at an organisational and a personal level, and no concept should be too "holy" to be challenged. This continuing self-examination should range from the organisation's culture to its routine procedures. Revision ensures that the service has a purpose rather than simply a routine.

The concept of Social Role Valorisation (SRV) begins with the principle that all people have equal value. If we deny this principle we have to start making judgements on the relative values of people, grading their rights and perhaps even their right to live. This acceptance of relativism gets us into a great deal of trouble. History records many past and present crimes and abuses based on the devaluation of certain groups and races. The most basic challenge in providing quality services to disabled people is that we must embrace the principle that the life of a disabled person is as valuable as our own.

> **‘Quality is like that. Once achieved, there is no permanence to it.’**

To ensure quality, the customer must come first. To be able to put the customer first we must know what the customer needs, not just in terms of material needs but also in terms of personal development, spiritual life, aspirations and preferences. Particularly in regard to people who may have poor communication skills, or none at all, this continuing reassessment of needs is difficult and demanding and, in many ways, subjective. Quality of service, however, begins with the quality of this assessment of needs. Quality does not come free of cost. It requires an element of leadership in each person, and a willingness to meet the challenges of disappointment and the knowledge that perfection will always elude us.

The motto of a cook I once sailed with was this: *You are only as good as your last meal.* He was consistently very good at his job. Quality is like that. Once achieved, there is no permanence to it. We can do better.

John Homan Yeppoon

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During May I attended a two-day CRU workshop on Leadership at which Michael Kendrick was the guest speaker. I found the content of Michael's presentation very challenging as I believed that I understood and implemented the principles of normalisation.

With the realisation that in recent years, community-based organisations seem to have moved on from the honeymoon-stage of providing personalised services, there is now a definite struggle to maintain a healthy enthusiasm when complex needs emerge. Ensuring that a client's interest is the main focus will always remain a tension for all those involved.

This seminar gave a human face to the way service providers interact with clients. Michael provided insights which acted as doorways through which services need to go if they are to understand the complexities of every day events. There is no doubt that there are many people who do want to build a better world for people with disabilities and it was encouraging to have Michael remind us not only how to do this, but also how to remain hopeful about our dreams as we journey together into the future.

Sandra Schleger. Rockhampton

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When provided with an opportunity to participate in the recent leadership workshop with Michael Kendrick, I was very keen to attend as my current work falls within a leadership role. As supervisor of a team working with people with disabilities, the issue of leadership is a daily challenge. In taking on the role I had great aspirations of employing a motivated, dedicated team who would focus on clients' needs and provide a relevant, realistic, quality, service. I was prepared to face challenges and difficulties, but I would never have anticipated facing many of the situations which have arisen or the personal costs involved. The easy side of leadership is exploring the fundamental principles, but the actual experience of facing the challenges is not so easy. It is not easy to hold what may be seen as an unpopular view or to work with resources and in circumstances not of our choosing. It is extremely difficult to endure loss of privacy, constant scrutiny, and involvement in conflict but these difficulties are common to a leadership role.

The road to developing leadership skills has certainly been a rocky one at times, but not without rewards. I have experienced great satisfaction in working through challenges and finally achieving objectives while increasing and developing my professional skills.

The most significant factor in developing my leadership abilities has been the support I have received from many people. They have provided me with honest feedback and helped with strategies to overcome feelings of inadequacy. They continue to challenge and question me, ensuring that I remain focused on my objectives.

While the workshop encouraged me to reflect on this personal involvement in leadership, it also emphasised that successful leadership results from the combined efforts of many people. This highlights the importance of recognising and nurturing leadership capacities within a team. Whether a leadership role is linked to a formal position of authority or to an informal role through the activities of supporting and challenging each other, it is vital in ensuring the ability to stay focused and responsive to the needs of clients. After all, that's what we are here for.

Caroline Yeomans Mackay

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I recently had the privilege of attending two workshops in Rockhampton presented by Michael Kendrick in the CRU *Key Challenges* series. This was the third occasion I had heard Michael speak during his visits to Australia. Once again, I found the experience challenging, inspiring and relevant to all aspects of life. Michael constantly challenged me to examine my work practices and to strive to make the personal commitment necessary to bring about change in the lives of people who are marginalised by society. In issuing these challenges, he also comforted me with the knowledge that while some personal costs can be associated with rising to a challenge, these costs can be recognised and overcome. As the parent of a disabled child, and a worker in the field, I am fully aware of the struggle that lies ahead, but I feel confident that the workshop provided valuable tools for bringing about a greater quality of life for all people with disabilities.

Dianne Alexander Emerald