

What people with disabilities would like direct care service providers to know about . . .

## Friendships



**Institute on Human Development and Disability**  
*Center for Excellence in Developmental Disabilities Education,  
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# **Friendships**

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## **Purpose**

This training is designed to provide practical tools and practice exercises that providers can use to build the capacity of staff to support the development of friendships and relationships between people with disabilities and other members of the community. The materials were developed in collaboration with people with disabilities whose contributions and ideas are prominently featured in this curriculum.

## **About the Authors**

Rick Strickland and Connie Williams of Star Choices Inc. in Macon, Georgia, developed the ideas and training format that form the structure of this module. Other contributors include Sherry Lee, Darlene Coggins, Mark Christiansen, Alvin Evans, Michael Jackson, Denise Hall and Alisa Brown.

## **Getting Started**

The person who facilitates this training should become familiar with the information and exercises so they can comfortably present the information and conduct the exercises with others. If time permits, additional reading in the area of supporting friendships is suggested and a bibliography is included as Attachment A. The facilitator should arrange for a quiet place for training and adequate time with participants to cover the curriculum. Training can be conducted in one long session with breaks to give people time to rest or eat, or it can be divided into several shorter sessions.

### **Why this training is important**

The information contained in this section can be presented in a lecture format. Overhead transparencies or handouts can be used to summarize the major points of this section.

Forming friendships and relationships with others is a high priority for many people with disabilities just as it is for everyone. For most people, having friends and developing satisfying relationships are important contributors to our quality of life. In the past, people with disabilities were kept apart from the mainstream of society. Families either placed their family member with a disability in an institution or kept them at home with no outside support. Families often felt the need to protect that individual from negative reactions by the general public or felt such guilt and shame about disability that they hid the person away at home. Institutions kept people with disabilities behind walls and locked doors on segregated campuses where their only contacts were with staff and visiting family members and friends, whose visits were often infrequent.

We have come a long way from those days of complete isolation. More people with disabilities live independently or with support and not only are

*People with disabilities are adults and have the right to develop friendships and relationships with other people with and without disabilities.*

people with disabilities visible, but they participate in and actively contribute to their communities.

Some support staff are very skilled at supporting people with disabilities to develop friendships and enjoy their privacy as illustrated by this comment from Gabriel Nesbitt, who shared her thoughts at an annual staff retreat for Georgia Options in Community Living, a supported living provider in Athens, Georgia. Ms. Nesbitt said, "People respect my privacy and let me be alone with my friends or let me be by myself in my bedroom with the door closed while I watch TV or listen to loud music." ("Thoughts on Respect").

Unfortunately, some current practices for supporting people with disabilities contribute to their continued isolation. Sheltered workshops, nursing homes, group homes, some mental retardation centers, and some day habilitation programs congregate people with disabilities together in one place and limit their access to the larger community. Lack of funding and inadequate training make it difficult for staff to provide effective support to people with disabilities so they can succeed in developing friendships and relationships outside the disability community.

Sometimes the development of friendships and relationships may even be actively discouraged by staff who are uncomfortable with their own feelings about people with disabilities having long-term, meaningful and intimate relationships with others, or because of the perceived risk to the person with a disability. An adult self-advocate who attends a day habilitation center told the group that when he was

sitting alongside his friend on an outside bench, “a staff member told me that I could not sit with my friend. They told me I had to go inside.” Another self-advocate talked about the need to hide his friendship with his girlfriend from staff in order to keep from being separated from her at the workshop.

Even when day habilitation programs and residential programs attempt to involve the people they serve in community activities, restrictions on funding, transportation or staff time often require staff to provide support to a group of people with disabilities to go into the community for activities rather than providing the support people need to become part of their communities in a more natural and individual way.

People with disabilities are adults and have the right to develop friendships and relationships both with other people with disabilities and people without disabilities.

But despite this right, they often do not have access to opportunities or skills to succeed in developing and main-

taining friendships. Providers provide a vital link for people with disabilities by helping them gain access to opportunities for friendships and helping them acquire skills to develop and maintain friendships and relationships. We can know if we are successful in our efforts to provide support by watching as people make friends and develop relationships.

*“It is not enough for a person to claim a right. We must support each person in obtaining the skills and opportunities to exercise their rights. We can judge success by what is actually happening for that person.” – Michael J. Wickham, Georgia Options Retreat 2001*

## **Reminiscing about a friend**

Begin this exercise by talking about an important friendship and some of the things that made the friendship work such as shared experiences, the ability to share other aspects of their lives and communicate freely, having fun together or taking risks together. Invite each person in the group to share their memories of a special friendship and what it has meant in their lives.

This activity helps to set the tone of the workshop by providing participants the opportunity to reflect on the importance and meaning of a special friendship.

## **Common elements of friendship**

All friendships have elements in common. Ask for a volunteer to record the responses of group members using a marker and large chart. Then ask participants to share some of the common elements that any friendship must have to survive. Participants are then asked to discuss barriers which may prevent people with disabilities from being able to form relationships with these common elements. Ask the group to discuss ways in which these barriers can be eliminated or minimized.

## **Friendship building strategies**

Following are two exercises that may work to help people think about the way they develop friendships for themselves and in turn how similar strategies can



be applied to support friendship development for different people with disabilities.

**New town scenario:** You have just moved to Medicine Hat, Alberta, Canada. You have no family within thousands of miles. You don't know anyone in your town other than the person who hired you for your new job, which won't start for over a month. Your dog is mad at you for moving. The people seem friendly enough, though.

Medicine Hat is a medium-sized town. However, there are no large cities close enough to drive to for a short visit. What would you do to make friends and to get to know others? How would you make this community your home?

Identify barriers which might prevent or make it difficult for people with disabilities from doing some of the things you described in the previous exercise. Once you have listed the barriers, brainstorm strategies which could be used to minimize or remove the barriers for people with disabilities.

**Let's get specific.** If your group is large enough, divide them into three smaller groups and give each group a scenario with which to work in developing specific strategies for supporting the development of friendships for the person who is the subject of the scenario.

If the group is too small to divide, they can work through each of the three scenarios in turn.

*Brainstorm strategies which would be used to minimize or remove barriers for people with disabilities.*

**Laura** – Laura is a woman in her 30s who has cerebral palsy. She has an electric wheelchair and is able to move the chair without assistance as long as the controls are positioned correctly. She has very limited use of her hands and her legs. She is unable to speak more than a few words, however, her facial and eye expressions help her communicate. She is

*There are many different strategies that supporters can use to help people with disabilities develop friendships.*

intelligent and mild-tempered. She lives in a group home with several other women with disabilities.

She attends a sheltered workshop during the day but doesn't work much because of physical limitations. The activities that she participates in with the group home are all segregated activities. Community developers have trouble taking her out because of the physical lifting and the bulkiness of her chair. The group home has a van equipped with a wheelchair lift. She has family in the area whom she sees occasionally.

**Alfred** – Alfred is a man in his 30s who has Down Syndrome. He has good communication skills and no real physical impairments. When he was born, his parents were told about all the things Alfred would never do. At that time most families were told that institutionalization was the only sensible thing to do. Parents were told that they were incapable of handling the problems of a child with such a disability. Alfred's parents, however, decided to keep him at home and Alfred has always lived with his parents.

The professionals told Alfred's parents that he

would always be at the intellectual level of a 3-year-old child and his mother has always treated him as such. She talks to him as if he were a baby; she holds his hand in the store; she keeps track of all his things; and she does all household tasks for him. Consequently, Alfred responds accordingly. He talks the same way his mother talks to him; he becomes very upset when he doesn't get his way and bites people; and he brings puzzles and crafts to play with during the day to the sheltered workshop he attends. Needless to say, his parents are very protective of him and sometimes it takes a while to earn their trust in allowing Alfred to do other activities outside of the sheltered workshop.

Alfred's parents do take him to a lot of community events and Alfred participates in sports with his father. Alfred has no friendships and no contacts outside of his family and professionals.

**Sophia** – Sophia is a 13-year-old girl who goes to a segregated school. The school houses only students labeled as having either Severe Behavior Disorder or Autism. This has given the school a reputation for being a place for kids with behavior problems that cannot be handled in the general community. Sophia was placed in this school at 6 years of age after she was given an evaluation by a psychiatrist contracted by the school board. He diagnosed her as autistic.

Sophia is obviously smart yet has problems with communication and controlling impulsiveness. She also has some behaviors which involve repetition of phrases and the insistence that the person with her repeat them word for word. If the person has trouble

repeating her phrases correctly, her stress level rises and she gets more and more upset and frustrated. Mostly, however, she is funny and enjoyable to be around.

She lives at home with her mother. She goes to an after-school program where she interacts with people with and without disabilities in her age group. She hasn't made any real friendships although she is accepted and liked here. Outside of this, she spends time with her mother and other family members but remains very isolated.

Invite each group to report on their strategies to the larger group and invite comment from other groups.

### **Using a variety of strategies**

There are many different strategies that supporters can use to help people with disabilities develop friendships. Describe the following strategies to the group and invite them to give input or ask questions as you go through the material.

**One-to-one or matching individuals.** One-to-one matching is an activity that matches an individual with a disability with an individual without a disability who volunteers to develop a supportive friendship. This sounds like a really good idea and sometimes it actually works. (However, in many instances in the past where this strategy has been tried, it just didn't work.) Creating an artificial friendship where the person without a disability

volunteers to “help” another person creates an off-balance relationship that is difficult to sustain over time. True friendship requires a fairly equal social exchange.

### **Community development with self-advocates.**

This kind of activity can be successful if organizers are careful to ensure that the group does not remain a segregated group. It is important that people with disabilities have opportunities to develop relationship with peers who have disabilities as well as those who do not.

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### **Using social networks to build friendships.**

Many people use social networks to find opportunities to develop friendships. There are four main types of social networks that can be used to build friendships:

- **Natural networks** are those networks that already exist for people with disabilities, such as extended family networks or networks that evolve at work, around leisure activities and places of worship.
- **Contrived Networks** are networks that are artificially formed around a person with a disability to support the development of friendships for people who have few friends and little access to natural networks. This type of planned network includes ideas like a “circle of friends.” A

facilitator helps the person with a disability think about what kinds of friendships or relationships they already have and helps them fill in the gaps in their natural network by inviting others to join in their support. For example, a person who wanted to buy a house might work with their facilitator to invite a banker to join the circle to lend their influence and expertise to the group.

● **Sharing networks with others** is a way of bringing someone with a disability into a group through becoming a member of a network with a friend or acquaintance who is already a member of the network. This can be a shortcut to the development of friendships with other members of the network since there is a mutual friend who is introducing the new members to others in the group. Many civic and service groups bring new members on board in this way.

● **Bridging to the community.** A final strategy for supporting people to develop friendships is one that we all use. We introduce people that we know to each other. We invite people that we know to join us in activities with other people that we think will like them and enjoy their company. When serving as a bridge to the community, be sure your role is clear in your own mind. You can either be a friendship facilitator, helping others develop friendships, or you can be a friend. It is difficult to support both roles without getting confused or causing confusion on the part of the person you are supporting. Remember, though, that one person can only

support so many real friendships. Trying to be everybody's friend can lead to frustration and burn out.

*Exercise:* If there are more than eight people working on this module, divide them into smaller groups and ask them to work together for 20-30 minutes and develop examples where they or someone with a disability has participated in one of the strategies described above. The group is to evaluate those strategies which are most effective and report those which worked the best to the larger group.

*Remember that one person can support so many real friendships. Trying to be everybody's friend can lead to frustration and burn out.*

### **Maintaining friendships**

Most true friendships require maintenance to sustain them over time. Share the following examples of strategies that participants can use to support people with disabilities to be more successful in developing and maintaining friendships as well as making and sustaining friendships of your own.

**First impressions.** In our fast moving and superficial society, first impressions are important. The first impression may be the last impression and a lost opportunity for friendship if either we or the person we are supporting makes a poor impression. Making sure that a person has age appropriate, clean, well-fitting clothes and shoes is one way to help them make a good first impression. Paying attention to personal hygiene, hair care, and good manners helps give a person confidence and makes them more

appealing when they are meeting someone for the first time. Other things which enhance a person's appeal to others such as appropriate posture, voice quality and eye contact are social skills which can be learned. All the skills described above are things that can be learned if support is provided by someone who is knowledgeable and caring.

*Exercise:* As a group, brainstorm other social skills that can help a person make a good first impression and then brainstorm ways to support someone to learn each specific skill. The facilitator of the group should record the ideas of the group and summarize them.

**Shared interests.** People who share interests have something in common that can help support a friendship over time. The shared interest provides a topic of conversation, supports activities and may bring a person into contact with others who can also play a part in supporting the friendship and creating new ones.

*People who share interests have something in common that can help support a friendship over time.*

*Exercise:* Ask participants to share some of the common interests that have helped them develop friendships and relationships. Then ask them to think of a person they know who needs some support and which interests the person has which may be shared by others. Ask them to talk about ways to link the person with others who share the same interests. This may take some creativity. Local service clubs, support groups, special interest clubs, places where



people hang out who share common interests, hobby shops and places of employment are some of the sources which can provide links to friendships.

**Availability.** Think about people you know who have disabilities. Are they available for friendships? Some of the barriers to availability for friendships with people without disabilities include regularly scheduled segregated activities such as day habilitation programs, sheltered workshops and employment enclaves or work groups. Other activities which purport to get people out into the community but which provide few opportunities for making friends with people without disabilities include group outings and activities escorted by staff.

*Sometimes a person's day may be so scheduled with "programming" that there is little discretionary time to explore new possibilities for developing friendships.*

Other barriers to availability include lack of transportation, lack of flexibility in scheduling activities due to staff scheduling and lack of time and motivation for staff to support people to explore opportunities for friendships through linking with the person's interests rather than their own. Sometimes a person's day may be so scheduled with "programming" that there is little discretionary time to explore new possibilities for developing friendships. Health and mobility issues may also present some challenges.

Family members may be uncomfortable with staff supporting their loved one to venture out and form friendships because they are afraid that their loved one will be ridiculed or shamed, or because they fear their family member may be hurt if a close or inti-

mate relationship develops from a friendship.

*Exercise:* Ask small groups to work together to think of solutions for the barriers listed above, and other barriers they may add to the list. Ask them to share their solutions with the large group and ask someone to record their ideas on wall paper.

*People with disabilities who have lived in segregated settings for long periods of time may not understand the need for reciprocity or have the skills necessary to reciprocate.*

**Chemistry.** Some friendships are based on something magical. Two people meet and a friendship develops. They may have nothing in common other than being in the same place at the same time. They may even be total opposites and not at all each other's type, but they become friends just the same. Like "love at first sight," people can rapidly develop a rapport that can sustain their friendship or relationship over time.

*Exercise.* Ask the group to share experiences they have had with this kind of friendship based on "chemistry".

**Reciprocity.** Long lasting friendships usually include reciprocity. Each partner in the friendship receives some reinforcement or benefit from the relationship. People with disabilities who have lived in segregated settings for long periods of time may not understand the need for reciprocity or have the skills necessary to reciprocate. It is important for people with disabilities to be able to give to others, both emotionally and through service to others.

When all of the emotional support and service flows one way, friendships tend to eventually fade away, both from burn-out from the giver, and from a feeling of guilt or unmet obligation from the receiver.

Friendships are not always 50/50 in terms of reciprocity. They fluctuate over time according to the circumstances in which people find themselves. Sometimes it is more like 90/10 or 25/75. Partners in a friendship need to experience both the role of giver and receiver in order to sustain the friendship over time.

*Exercise:* Ask participants to share experiences where reciprocity was important to sustaining a friendship. Ask each participant to write down at least five ways they can be a better reciprocity facilitator.

**Commitment letter.** One important part of making a change in the way we do things is to make a written commitment. Something about the process of thinking carefully about what we want to do and writing it down makes it much more likely that we will actually do what we have committed to do.

*Exercise:* Ask each participant to write a letter committing to facilitate a friendship for at least one person with a disability. Ask them to be specific – who will they choose to support, when will they start, what are some of the strategies they will use to support their focus person to form a new friendship or maintain a friendship they have already developed.

Ask for volunteers to share what they have written.

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## Summary and evaluation

It is hoped that participation in this workshop has helped refresh some skills you already have and that you have learned some new skills to help you as you support people with disabilities. The next step is to go back to your work and try out some of the things we have talked about with the people you support. Make a list of strategies to try and work through them one by one when opportunities arise where they are appropriate. Supporting others as they develop friendship skills is not something you can learn all at once – practice is required until the principles and strategies become a natural part of your work.

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