This year, my husband and I proudly celebrate our 28th wedding anniversary, and we’re looking forward to the next 28! But it wasn’t always so. After about ten years of marriage, I was frustrated and decided to seek the help of a family counselor. What was the problem? Something most wives can probably relate to: my hubby didn’t always put the toilet seat down or hang his wet towels up, and so on and so forth—all minor irritants that (in my mind) generated major stress!

Off to the counselor I went. She first asked if these were new behaviors of my husband—had he just started doing these things? No, and that was part of the problem; I’d had ten years of this! She chuckled and noted that my husband’s actions must have been acceptable at one time, for I didn’t complain before. Darn—I had to admit she was right! She empathized with me, and then explained that when two people are in any type of relationship, it’s like they’re dancing a slow dance. She asked, “Do you want to keep ‘dancing’ with your husband or are you ready to end the marriage?” No, I didn’t want a divorce—I just wanted him to change! She replied, “OK, so it’s like the slow dance. When you’re slow dancing, one person has to follow the other’s lead. If you want to keep dancing with your husband, you need to change your dance steps, and he’ll change his.” So if I changed my behavior, I’d see changes in my husband? Yes, and she was right. My hubby got better at putting the toilet seat down and I got better at putting things in perspective. We both changed, and the slow-dance philosophy has been helpful to me ever since.

In so many situations, two people—husband/wife, parent/child, teacher/student, teacher/child’s parent, service provider/person with a disability—get locked into patterns of behavior. One person may attempt to exert power and control, the other resists. In the process, a battle of wills ensues, and neither person is aware of the pattern that repeats itself, which may escalate into all-out war!

Every person is born with the innate need to control one’s own life. Unfortunately, personal power is often stripped from children and adults with disabilities—by parents, teachers, service providers, and others in positions of authority. Similarly, many parents of children with disabilities justifiably feel they have no power as members of their children’s IEP teams, and/or in other situations where “someone in authority” (physician, service provider, teacher, etc.) is exerting powerful influence. But when a person feels she has little or no control, she’ll take every opportunity to exert control, whenever and wherever possible—in subtle or not-so-subtle ways.

For example, when a person with a disability doesn’t robotically follow the demands of a parent, teacher, therapist, service provider, or other “authority,” and actively or passively resists, we may say the person is “non-compliant” or “manipulative.” We may then slap a “behavior problem” label on him. At that point, we may exert even more control, which causes him to resist harder, and the vicious cycle escalates (to the grave detriment of the person with a disability). This situation may be especially common if the goal, activity, or demand is not relevant and meaningful and/or doesn’t make sense to the person.

When my son, Benjamin, was six, the physical therapist recommended water therapy. It seemed like a good idea, since he loved playing in the water. The
therapist had a set of weighted rings that she would drop to the bottom of the hot tub, one at a time. Benjamin was to retrieve these by “swimming” to the bottom of the tub, and this was supposed to help his gross motor, fine motor, and deep-breathing skills.

She dropped the first ring, and in his desire to “help,” Benjamin retrieved it for her. But when she dropped the second one, he looked at her like she was a big dummy—he was more than willing to pick up the first ring she “dropped,” but if she was dumb enough (in his mind) to drop a second one, she could get it herself! Thus, he refused to go underwater a second time, and after cajoling, nagging, and near-scolding by the therapist, she labeled him as “non-compliant.” But when Benjamin and his dad played similar “games” in our hot tub—activities which were relevant and meaningful and made sense to him—he enthusiastically participated. Thus, we probably should examine our hypothesis about the genesis of someone’s “behavior problem.” Is it the result of a person’s diagnosis? Is it a situational or environmental issue? Or could it be the direct result of our behavior? Whose “behavior problem” is it, really?

But what could happen if we apply the slow-dance philosophy? Whether one is a parent, teacher, therapist, service provider, etc., what if we changed our dance steps?

- What if we communicate differently—in our facial expression, tone of voice, body language, words, and more?
- What if we ask, instead of tell?
- What if we listen better, and really hear the person, and even try to dance in his shoes?
- What if we recognize that what’s important to the person with a disability—not what we might think is important—is the more critical factor?
- What if we wonder if our difficulties are the result of the other person’s long-term habits, actions, personality, etc., or our intolerance of same, as in my personal story described earlier?

Might any of these actions on our part result in a positive change in the other person’s behavior, reaction, or response? In turn, could that generate a more positive reaction from us, which again cycles into a more positive response from the person, and so on? Imagine how different IEP/ISP meetings and/or other personal interchanges might be different—and better—under these circumstances.

Let’s go further and think about the so-called inappropriate behaviors of children or adults with disabilities, like when we say a person is “non-compliant” or “manipulative.” Is it possible the person’s behavior is, in fact, a compelling means (to him) of exerting some control over his life? And since so many people with disabilities are considered incompetent or unable, shouldn’t this effort be viewed as a positive, instead of a negative? Similarly, and using the example of my son and the water therapy rings, is the person’s behavior a reaction to a nonsensical, irrelevant, and meaningless request? Again, shouldn’t we celebrate and respect—instead of demean—the person’s awareness and perspective? If the therapist had changed her dance steps and seen things from my son’s perspective, her actions, as well as her opinion of his behavior, would have been quite different.

In too many cases, maintaining heavy-handed power and control—not common sense, not respect and dignity, and not what’s important to the person with a disability—may be the core of our actions. But in the slow dance of relationships, a delicate balance is required. Changing our dance steps can result in a whole new dance (and a whole new relationship). Being light on our feet, remaining responsive, and gently and patiently helping our dance partner learn new steps when necessary are also essential.

On the other hand, if you and your dance partner are continually stepping on each other’s toes or worse, it might be time to gracefully bow out and let someone else dance in your place—temporarily or permanently. And when our dance partner is a person with a disability, shouldn’t she take the lead and shouldn’t we follow? Whose life is it anyway?