

Session 1

Creating a Safe Story Space

A 75-minute guided reflection session for parents and caregivers of children with disabilities.

Preview edition | Not the full curriculum

SESSION PURPOSE

Invite participants to notice the stories and expectations they bring into the room, establish choice-centered agreements, and practice listening without fixing or comparison.

A Place Within

A facilitator-led, research-informed reflection curriculum

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For institutional review only. No participant is required to disclose personal, medical, or identifying information.

BEFORE YOU BEGIN

Hold a reflective space, not a clinical one.

The facilitator's role is to guide structure, protect choice, and model respectful curiosity. It is not to interpret participants, solve family problems, or provide therapy.

This session supports

- Personal reflection and perspective-taking
- Listening without comparison or correction
- Naming social, family, medical, educational, and spiritual messages
- Choice about speaking, writing, or passing

This session does not provide

- Diagnosis, treatment, or clinical assessment
- Crisis counseling or emergency response
- Medical, legal, or special education advice
- A promise that one worldview is the correct worldview

SAFETY AND REFERRAL

Before the session, identify your organization's safeguarding lead, crisis procedure, and local referral resources. If a participant describes immediate danger, suspected abuse, or a mental health emergency, follow your organization's policy and applicable law. Do not try to manage a crisis through this curriculum.

Minimum facilitator readiness

- Familiarity with the full guide, local referral procedures, and disability-affirming communication
- Ability to interrupt advice-giving, comparison, and stigmatizing language respectfully
- A private, accessible setting with a clear plan for breaks and participant choice

Prepare the conditions for choice.

Complete this checklist before participants enter. The curriculum can structure the conversation, but the organization remains responsible for its setting, staff readiness, privacy practices, accessibility decisions, and referral procedures.

☐ Review the session plan and participant pages before arrival.

☐ Confirm room access, seating, restrooms, sensory needs, and remote access if used.

☐ Prepare a visible timer, blank paper, pens, water, and a quiet break area.

☐ Remove requests for diagnoses, child names, provider names, or case details from sign-in materials.

☐ Have referral and emergency procedures available but not displayed as a threat.

☐ Plan how you will invite, but never require, speaking.

Participant invitation language

This is a guided reflection group for parents and caregivers. You may speak, write privately, or pass at any point. Please do not include identifying medical details about your child or other family members. The group is educational and does not replace clinical, legal, or emergency support.

A calm pace with room to pass.

MINUTE S	STEP	PURPOSE
0-10	Arrival and orientation	Welcome, boundaries, and choice to pass
10-20	Shared agreements	Build the conditions for listening
20-35	Private reflection	The story I arrived with
35-52	Guided dialogue	What has been named for us?
52-64	Choice-based sharing	Pair, full group, or quiet writing
64-71	Integration	Notice what shifted or stayed present
71-75	Closing	One word, pass, and support reminder

Pacing notes

- Do not make up time by cutting the closing or the support reminder.
- Silence is participation. Allow 20 to 30 seconds before repeating or reframing a prompt.
- If one voice is taking most of the space, thank the speaker and reopen choice to the group.
- If the group needs more containment, move from spoken sharing to private writing.

SUCCESS FOR SESSION 1

Participants understand the boundaries, experience a real choice about disclosure, and leave knowing that multiple disability perspectives can be examined without ranking families.

Exact facilitator language

Welcome. This group is a place to notice the stories, beliefs, and expectations that can gather around disability and caregiving. We are not here to decide the correct way to feel or to compare families. You control what you share. You may speak, write privately, or pass at any point.

This is an educational reflection program, not therapy, diagnosis, legal advice, or crisis care. Please keep identifying details about children and family members out of the conversation. If you need support beyond this group, I can help you locate our organization's referral options after the session.

Invite agreement

Choice	You may speak, write, pause, step out, or pass.
Privacy	Share your own learning outside the room, not another person's story.
No fixing	Listen without prescribing, correcting, or comparing.
Dignity	Use language that protects the dignity and agency of disabled people and families.
No case details	Do not share names, diagnoses, schools, clinicians, or other identifying details.
Difference	We can hold different beliefs and experiences without deciding whose family story is more valid.

Ask: Is there anything this group needs in order for choice and dignity to be real today? Add only agreements that fit the program boundaries.

The story I arrived with

Purpose: help participants notice an active story without asking them to explain, defend, or resolve it.

FACILITATOR PROMPT

Think about the last week. What message, expectation, image, or sentence about disability or caregiving has been loud for you? It may have come from you, another person, an institution, a faith community, media, or nowhere you can easily name.

Write for five minutes. You may use words, fragments, or a simple drawing. Do not include names or details that identify your child or anyone else.

Private reflection prompts

- What does this story ask me to believe about my child, myself, or our future?
- When does the story feel helpful, and when does it feel heavy?
- Whose language can I hear inside it?
- What part of my experience does the story leave out?

Choice-based debrief

Invite participants to share only a word or pattern they noticed. Do not ask for the full story. Offer three choices: share with the group, share with one partner, or continue writing privately.

If someone begins sharing identifying or highly sensitive details, say: 'I want to protect your family's privacy. Could we stay with the message or feeling you noticed, without the names or case details?'

What has been named for us?

Invite the group to generate categories of messages without assigning them to specific people. Examples may include medical, educational, family, cultural, spiritual, financial, and rights-based perspectives.

Ask

- What messages are parents expected to accept?
- What messages create belonging or relief?
- What messages create pressure, shame, or isolation?
- Which messages seem to conflict with each other?

Facilitator response moves

- Reflect the pattern, not your interpretation.
- Ask what the message does, not whether it is true.
- Return to choice when emotion rises.
- Interrupt ranking, fixing, and stigmatizing language.

When the room gets difficult

SILENCE

Allow it. Then offer: 'You can keep writing. No one needs to fill the space.'

STRONG EMOTION

Say: 'Thank you for letting us know. Would a pause, quiet writing, stepping out, or staying with the group feel best right now?'

ADVICE-GIVING

Say: 'Let's pause the solutions and return to listening. What did you hear that you want to honor?'

STIGMATIZING LANGUAGE

Name the impact without shaming the speaker. Re-center the dignity and agency of disabled people, then restate the group agreement.

Close without forcing resolution.

Invite one sentence, one word, or a pass: 'What do you want to carry forward from today, and what would you rather leave here for now?'

Thank participants for the choices they made about speaking and silence. Remind them that strong feelings do not need to be resolved in the room. Repeat the organization's referral options and emergency boundaries.

Between-session invitation

Notice one message about disability or caregiving during the week. Record where it appeared and what it seemed to ask you to believe. Do not collect this writing unless the participant explicitly chooses to bring it back.

Implementation feedback

Use an anonymous form. Do not request a diagnosis, child's name, or participant narrative. Suggested items:

- I understood that speaking and disclosure were optional.
- The facilitator protected privacy and redirected advice-giving.
- The session helped me notice messages shaping my experience.
- I understood that this was educational and not clinical care.
- What should be changed before this session is used again?

PREVIEW USE

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