

Disability Etiquette and Information©

*Compiled by Denise Welch
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Saddleback Kiwanis Club
and
Health Care Council of Orange County*



**DISABILITY ETIQUETTE
TIPS ON INTERACTING
WITH PEOPLE WITH DISABILITIES**

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*Saddleback Kiwanis Club***

The Saddleback Kiwanis Club support many projects. Several of these deal with Disabilities. They are:

Kiwanis Aktion Club:

Kiwanis Low Vision

Kiwanis Stroke Club

Meals on Wheels

If you would like to join us in supporting these groups, please call

Elvan Whiteleather 949-457-1499

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And

HEALTH CARE COUNCIL OF ORANGE COUNTY
ORANGE COUNTY AREA HEALTH EDUCATION CENTER (AHEC)
Committee on Older Adults and Persons with Disabilities

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Signage

NOTE ACCESSIBILITY OF YOUR BUSINESS OR PROGRAM by using the symbols below in advertising, on fliers, and as signage at the location of the service. Be sure to use the verbal description, along with the symbol. As signage, enlarge the symbol and place it where it will be most visible.



International Symbol of Accessibility:

The wheelchair symbol should only be used to indicate access for individuals with limited mobility, including wheelchair users. For example, the symbol is used to indicate an accessible entrance, bathroom or telephone that is lowered for a wheelchair user.








Sign Language Interpreted:




The symbol indicates that Sign Language Interpretation is provided for a lecture, tour, performance, conference or other program.



International Symbol for Teletypewriters:

TTY indicates a device used with the telephone for communication between Deaf, hard of hearing, speech impaired and/or hearing persons.

Signage	
	<p><i>Closed Captioning (CC):</i></p> <p>This symbol indicates that a television program or videotape is closed captioned. Televisions produced since 1993 have a built-in chip to display dialogue for programs that are captioned. For televisions without the chip, decoders are available upon request</p>
	<p><i>Assistive Listening System:</i></p> <p>These systems transmit amplified sound via hearing aids or head sets. They include infrared, loop and FM systems.</p> <p><i>*A Frequency Modulation (FM) System is a wireless amplification system that consists of a microphone, transmitter and receiver which allows the listener to hear the speaker's voice in noisy situations.</i></p>
	<p><i>Braille Symbol:</i></p> <p>This symbol indicates that printed matter is available in Braille, including exhibition labeling, publications and signage.</p>
	<p><i>Accessible Print (18 pt. Or Larger):</i></p> <p>The symbol for large print is "Large Print" printed in 18 point or larger text. In addition to indicating that large print versions of books, pamphlets, museum guides and theater programs are available, the symbol may be used on conference or membership forms to indicate that large print materials will be provided.</p>
	<p><i>Audio Description for TV, Video and Film:</i></p> <p>This service makes television, video and film more accessible for persons who are blind or have low vision. Description of visual elements is provided by a trained Audio Describer through the Secondary Audio Program (SAP) of televisions and monitors equipped with stereo sound.</p>

Signage	
	<p><i>Live Audio Description:</i></p> <p>A service for people who are blind or have low vision that makes visual and performing arts more accessible. A trained Audio Describer offers live commentary or narration (via headphones and a small transmitter) consisting of concise, objective descriptions of visual elements: for example, a theater performance or a visual arts exhibition at a museum.</p>
	<p><i>Access (Other Than Print or Braille) for Individuals Who Are Blind or Have Low Vision:</i></p> <p>This symbol may be used to indicate access for people who are blind or have low vision including: a guided tour, a path to a nature trail or a scent garden in a park, and a tactile tour of a museum exhibition that may be touched.</p>
	<p><i>Access (Other Than Print or Braille) for Individuals Who Are Blind or Have Low Vision:</i></p> <p>A CART reporter, using a stenotype machine, laptop computer and real-time software gives an instant translation of the spoken word into English text.</p> <p><i>A CART reporter does not provide the same service as an interpreter. CART brings spoken language into written form. It does not translate one language into another (i.e. American Sign Language to English).</i></p>

Introduction

THE NATIONAL ORGANIZATION ON DISABILITY reports that more than 54 million Americans have a disability. This booklet is for anyone—with or without a disability—who wants to interact more effectively with people with disabilities.

The Americans with Disabilities Act (ADA) of 1990 was conceived with the goal of integrating people with disabilities into all aspects of American life. Sensitivity toward people with disabilities is not only in the spirit of the ADA, it makes good sense.

No one has to feel awkward when dealing with a person who has a disability. This booklet provides some basic tips to follow. And, if you are ever unsure about what to do or say to a person who has a disability, just ask!

The Basics

ASK BEFORE YOU HELP.

Just because someone has a disability, don't assume she needs help. Adults with disabilities want to be treated as independent people. Offer assistance only if the person appears to need it. And ask how before you act.

BE SENSITIVE ABOUT PHYSICAL CONTACT.

Some people with disabilities depend on their arms for balance. Grabbing them—even if your intention is to assist—could knock them off balance. Avoid patting a person on the head or touching his wheelchair, scooter or cane. People with disabilities consider their equipment part of their personal space.

THINK BEFORE YOU SPEAK.

■ Always speak directly to the person with a disability, not to his companion, aide or sign language interpreter. Making small talk with a person who has a disability is great; just talk to them as you would with

The Basics

anyone else. Respect their privacy. If you ask about his disability, they may feel like you are treating him as a disability, not as a human being. (However, many people with disabilities are comfortable with children's natural curiosity and do not mind if a child asks them questions.)

DON'T MAKE ASSUMPTIONS.

- People with disabilities are the best judge of what they can or cannot do.
- Don't make decisions for them about participating in any activity. Depending on the situation, it could be a violation of the ADA to exclude people because of a presumption about their limitations.

Terminology Tips

PUT THE PERSON FIRST. Say "person with a disability" rather than "disabled person." Say "people with disabilities" rather than "the disabled." For specific disabilities, saying "person with Tourette syndrome" or "person who has cerebral palsy" is usually a safe bet. Still, individuals do have their own preferences. If you are not sure what words to use, ask.

- Avoid outdated terms like "handicapped" or "crippled." Be aware that many people with disabilities dislike jargony, euphemistic terms like "physically challenged" and "differently abled."
- Say "wheelchair user," rather than "confined to a wheelchair" or "wheelchair bound." The wheelchair is what enables the person to get around and participate in society; it's liberating, not confining.
- With any disability, avoid negative, disempowering words, like "victim" or "sufferer." Say "person with AIDS" instead of "AIDS victim" or "person who suffers from AIDS."
- It's okay to use idiomatic expressions when talking to people with

Terminology Tips

disabilities. For example, saying, “It was good to see you,” and “See you later,” to a person who is blind is completely acceptable; they use these expressions themselves all the time!

■ Many individuals who are Deaf communicate with sign language and consider themselves to be members of a cultural and linguistic minority group. They refer to themselves as Deaf with a capital “D,” and may be offended by the term “hearing impaired.” Others may not object to the term. In general, it is safest to refer to people who have hearing loss but who communicate in spoken language as “hard of hearing” and to people with profound hearing losses as Deaf or deaf.

Individuals Who Use Wheelchairs/Scooters or Have Mobility Impairments

PEOPLE WHO USE WHEELCHAIRS/SCOOTERS have different disabilities and varying abilities. Some can use their arms and hands. Some can get out of their wheelchairs and even walk for short distances.

■ Wheelchair users are people, not equipment. Don’t lean over someone in a wheelchair to shake another person’s hand or ask a wheelchair user to hold coats. Setting your drink on the desktop attached to someone’s wheelchair is a definite no-no.

■ Don’t push or touch a person’s wheelchair; it’s part of her personal space. If you help someone down a curb without waiting for instructions, you may dump her out of the chair. You may detach the chair’s parts if you lift it by the handles or the footrest.

■ Keep the ramps and wheelchair-accessible doors to your building unlocked and unblocked. Under the ADA, displays should not be in front of entrances, wastebaskets should not be in the middle of aisles and boxes should not be stored on ramps.

Individuals Who Use Wheelchairs/Scooters or Have Mobility Impairments

- If your building has different routes through it, be sure that signs direct wheelchair users to the most accessible ways around the facility. People who walk with a cane or crutches also need to know the easiest way to get around a place, but stairs may be easier for them than a ramp. Ensure that security guards and receptionists can answer questions about the most accessible way around the building and grounds.
- If the nearest public restroom is not accessible or is located on an inaccessible floor, allow the person in a wheelchair to use a private or employees' accessible restroom.
- People who use canes or crutches need their arms to balance themselves, so never grab them. People who are mobility-impaired may lean on a door for support as they open it. Pushing the door open from behind or unexpectedly opening the door may cause them to fall. Even pulling out or pushing in a chair may present a problem. **Always ask before offering help.**
- Don't ask a wheelchair user to hold things for you. Respect her personal space.
- If you offer a seat to a person who is mobility-impaired, keep in mind that chairs with arms or with higher seats are easier for some people to use.
- Falls are a big problem for people with mobility impairments. Be sure to set out adequate warning signs after washing floors. Also put out mats on rainy or snowy days to keep the floors as dry as possible. (Make sure they don't bunch up and make the floor impassable for wheelchair users.)
- People who are not visibly mobility-impaired may have needs related to their mobility. For example, a person with a respiratory or heart condition may have trouble walking long distances or walking quickly.

Individuals Who Use Wheelchairs/Scooters or Have Mobility Impairments

■ Some people have limited use of their hands, wrists or arms. Be prepared to offer assistance with reaching for, grasping or lifting objects, and opening doors.

People Who Are Blind or Visually Impaired

PEOPLE WHO ARE BLIND know how to orient themselves and get around on the street. They are competent to travel unassisted, though they may use a cane or a guide dog. A person may have a visual impairment that is not obvious. Be prepared to offer assistance—for example in reading—when asked.

■ Identify yourself before you make physical contact with a person who is blind. Tell him your name—and your role if it's appropriate, and be sure to introduce him to others who are in the group, so that he's not excluded.

■ People who are blind need their arms for balance, so offer your arm—don't take his—if he needs to be guided. (However, it is appropriate to guide a blind person's hand to a banister or the back of a chair to help direct him to a stairway or a seat.)

■ If the person has a guide dog, walk on the side opposite the dog. As you are walking, describe the setting, noting any obstacles, such as stairs (“up” or “down”) or a big crack in the sidewalk. Other hazards include: revolving doors, half-opened filing cabinets or doors, and objects protruding from the wall at head level such as hanging plants or lamps. If you are going to give a warning, be specific. Hollering, “Look out!” does not tell the person if he should stop, run, duck or jump.

■ If a person who is blind needs to be guided, offer your arm—**don't take his.**

■ If you are giving directions, give specific, non-visual information.

People Who Are Blind or Visually Impaired

- If you need to leave a person who is blind, inform him first and let him know where the exit is, then leave him near a wall, table, or some other landmark. The middle of a room will seem like the middle of nowhere to him.
- Don't touch the person's cane or guide dog. The dog is working and needs to concentrate. The cane is part of the individual's personal space. If the person puts the cane down, don't move it. Let him know if it's in the way.
- Offer to read written information—such as the menu.
- If you serve food to a person who is blind, let him know where everything is on the plate according to a clock orientation (twelve o'clock is furthest from them, six o'clock is nearest). Remove garnishes and anything that is not edible from the plate.
- Be specific when giving directions to people who are blind or visually impaired.
- A person who is visually impaired may need written material in large print. A clear font with appropriate spacing is just as important as the type size. Labels and signs should be clearly lettered in contrasting colors. It is easiest for most people with vision impairments to read bold white letters on black background.
- Good lighting is important, but it shouldn't be too bright. In fact, very shiny paper or walls can produce a glare that disturbs people's eyes.
- Keep walkways clear of obstructions.

People Who Are Deaf or Hard of Hearing

AMERICAN SIGN LANGUAGE (ASL) is an entirely different language from English, with a syntax all its own. Speech reading (lip reading) is difficult for people who are Deaf if their first language is ASL because the

People Who Are Deaf or Hard of Hearing

majority of sounds in English are formed inside the mouth, and it's hard to speech read a second language.

- People who are hard of hearing, however, communicate in English. They use some hearing but may rely on amplification and/or seeing the speaker's lips to communicate effectively.
- There is a range of communication preferences and styles among people with hearing loss that cannot be explained in this brief space. It is helpful to note that the majority of late deafened adults do not communicate with sign language, do use English and may be candidates for writing and assistive listening devices to help improve communication. People with cochlear implants, like other people with hearing impairments, will usually inform you what works best for them.
- When the exchange of information is complex—such as during a job interview or doctor's visit or when reporting a crime—the most effective way to communicate with a native signer is through a qualified sign language interpreter. For a simple interaction—such as ordering in a restaurant or registering for a hotel room—writing back and forth is usually okay.
- Follow the person's cues to find out if she prefers sign language, gesturing, writing or speaking. If you have trouble understanding the speech of a person who is deaf or hard of hearing, let her know.
- When using a sign-language interpreter, look directly at the person who is deaf, and maintain eye contact to be polite. Talk directly to the person (“What would you like?”), rather than to the interpreter (“Ask her what she'd like.”).
- People who are deaf need to be included in the decision-making process for issues that affect them; don't decide for them.
- Before speaking to a person, who is deaf or hard of hearing, make sure

People Who Are Deaf or Hard of Hearing

that you get her attention. Depending on the situation, you can extend your arm and wave your hand, tap her on the shoulder or arm.

- Rephrase, rather than repeat, sentences that the person doesn't understand.
- When talking, face the person. A quiet, well-lit room is most conducive to effective communication. If you are in front of the light source—such as a window—with your back to it, the glare may obscure your face and make it difficult for the person who is hard of hearing to speech read.
- Speak clearly. Most people who are hard of hearing count on watching people's lips as they speak to help them understand. Avoid chewing gum, smoking or obscuring your mouth with your hand while speaking.
- There is no need to shout at a person who is deaf or hard of hearing. If the person uses a hearing aid, it will be calibrated to normal voice levels; your shout will just sound distorted.
- People who are deaf (and some who are hard of hearing or have speech disabilities) make and receive telephone calls with the assistance of a device called a TTY (short for teletypewriter; also called a TDD). A TTY is a small device with a keyboard, a paper printer or a visual display screen and acoustic couplers (for the telephone receiver). Dial 711 for direct access.
- When a TTY user calls a business that does not have a TTY, she places the call through her state's relay service. Likewise, a business that does not have a TTY can reach a customer who is a TTY user through the relay service. If you receive a relay call, the operator will identify it as such. Please do not hang up; this is the way that people who are deaf are able to place an order at your pizza parlor, call your store to find out what hours you are open, or make a reservation at your restaurant. Dial 711 for direct access.

People Who Are Deaf or Hard of Hearing

- Do not obscure your face when communicating with a person who is hard of hearing
- If you have trouble understanding a person with speech impairment, ask him to repeat.

People With Speech Disabilities

A PERSON WHO HAS HAD A STROKE, is severely hard of hearing, uses a voice prosthesis or has a stutter or other type of speech disability may be difficult to understand.

- Give the person your full attention. Don't interrupt or finish the person's sentences. If you have trouble understanding, don't nod. Just ask him to repeat. In most cases the person won't mind and will appreciate your effort to hear what he has to say.
- If you are not sure whether you have understood, you can repeat for verification.
- If, after trying, you still cannot understand the person, ask him to write it down or to suggest another way of facilitating communication.
- A quiet environment makes communication easier.
- Don't tease or laugh at a person with a speech disability. The ability to communicate effectively, and to be taken seriously, is important to all of us.

People of Short Stature

THERE ARE 200 DIAGNOSED TYPES OF GROWTH-RELATED DISORDERS that can cause dwarfism and that result in the person being 4 feet 10 inches or less in height. Average-size people often underestimate the abilities of people of short stature. For an adult, being treated as cute

People of Short Stature

and childlike can be a tough obstacle.

- Be aware of having necessary items within the person's reach to the maximum extent possible.
- Be aware that persons of short stature count on being able to use equipment that is at their height. Be sensitive about not using lower telephones, bank counters and urinals if they are in limited supply.
- As with people who have other disabilities, never pet or kiss a person of short stature on the head.
- Communication can be easier when people are at the same level. Persons of short stature have different preferences. You might kneel to be at the person's level; stand back so you can make eye contact without the person straining her neck (this can be hard to do in a crowded room); or sit in a chair. Act natural and follow the person's cues.

People With Cerebral Palsy (CP)

AS A RESULT OF INJURY TO THE CENTRAL NERVOUS SYSTEM, people with cerebral palsy (CP) have difficulty controlling their muscles.

- Follow the tips above for interacting with persons who have speech disabilities.
- Many people with CP have slurred speech and involuntary body movements. Your impulse may be to discount what they have to say, based on their appearance. **Monitor your responses and interact with the person as you would with anyone else.**
- A person who may appear to be drunk, sick or have a medical emergency might in fact have CP or another disability. Get the facts before acting on your first impression, whether the situation is business, social or law enforcement.

People with Tourette Syndrome

PEOPLE WITH TOURETTE SYNDROME may make vocalizations or gestures such as tics that they cannot control. A small percentage of people with Tourette syndrome involuntarily say ethnic slurs or obscene words. A person with Tourette syndrome will benefit from the understanding and acceptance.

- If a person with Tourette makes vocalizations during a conversation, simply wait for her to finish, and then calmly continue.
- The more the person tries to contain these urges, the more the urges build up. It may be helpful for a person with Tourette to have the option to leave the meeting or conversation temporarily to release the build-up in a private place.

People Who Look Different

A DIFFERENT ISSUE confronts people who may not be limited in their life activities, but who are treated as if they have a disability because of their appearance. Facial differences, such as cleft lip or palate, cranio-facial disfigurement, or a skin condition; those who are way above or way below the average height or weight; or someone who may display visible effects of medication, such as a tremor—in short, people who look different—have the frequent experience of finding others staring at them, looking away or looking through them as if they are invisible.

- **Everyone needs to have a positive self-image to be a fully participating member of society. Be sure that you don't contribute to stigmatizing people who look different.**
- If the situation is appropriate, strike up a conversation and include the person in whatever is going on, just as you would for an “average-looking” person.

People with Hidden Disabilities

NOT ALL DISABILITIES ARE APPARENT. A person may make a request or act in a way that seems strange to you. That request or behavior may be disability-related.

■ For example, you may give seemingly simple verbal directions to someone, but the person asks you to write the information down. He may have a learning disability that makes written communication easier for him. Or an apparently healthy person may ask to sit, rather than stand, in line. This person may be fatigued from a condition such as cancer, or may be feeling the effects of medication.

■ **Even though these disabilities are hidden, they are real. Please respect the person's needs and requests whenever possible.**

Epilepsy (Seizure Disorders)

EPILEPSY IS A NEUROLOGICAL CONDITION characterized by seizures that happen when the electrical system of the brain malfunctions. The seizures may be convulsive, or the person may appear to be in a trance. During complex partial seizures, the person may walk or make other movements while he is, in effect, unconscious.

■ If a person has a seizure, you cannot do anything to stop it. If he has fallen, be sure his head is protected and wait for the seizure to end.

■ When a seizure has ended, the person may feel disoriented and embarrassed. Try to ensure that he has privacy to collect himself.

■ Before you call 911 ASK the person if this is needed.

■ Be aware that beepers and strobe lights can trigger seizures in some people.

Multiple Chemical Sensitivity (MCS) and Respiratory Disabilities

PEOPLE WITH MCS AND RESPIRATORY DISABILITIES such as asthma or emphysema react to toxins in the air. Stale air, fumes from cleaning products, perfume, carpeting, air freshener or even the fumes from magic markers can trigger a severe reaction.

- Try to avoid spray-cleaning tables, windows or other surfaces while people are in your home. If you must use a spray product, spray or pour it closely into the cloth, not into the air. Use less-toxic products when possible.
- Second-hand smoke can be particularly harmful to people with MCS or respiratory disabilities. Follow and enforce no-smoking regulations, including in restrooms and stairwells. **Always ask before you help**

HIV & AIDS

PEOPLE WITH HUMAN IMMUNODEFICIENCY VIRUS (HIV) or Autoimmune Deficiency Syndrome (AIDS) have impaired immune systems, so their bodies have trouble fighting off infections.

- You can't catch HIV from casual contact such as shaking hands, so don't be afraid of touching or being touched by a person with AIDS.
- A person with HIV or AIDS, however, is at significant risk of picking up an airborne infection. Be conscious of not putting someone else at risk. If you have a respiratory infection or any other easily transmittable illness, be considerate and stay home, if possible.
- Many people with AIDS feel stigmatized. By simply greeting or shaking the person's hand, you are letting him know that he is accepted. It will mean a lot to him.

A WORD ABOUT CONFIDENTIALITY:

You may really care or you may just be curious about a person with a disability who is in crisis, suddenly ill, or misses appointments for unexplained reasons. In spite of your concern, please respect the privacy of a person with a disability. Allow him to discuss his situation if and when he feels comfortable doing so.

Psychiatric Disabilities (Mental Illness)

PEOPLE WITH PSYCHIATRIC DISABILITIES may at times have difficulty coping with the tasks and interactions of daily life. Their disorder may interfere with their ability to feel, think or relate to others. Most people with psychiatric disabilities are not violent. One of the main obstacles they face is the attitudes that people have about them. Because it is a hidden disability, chances are you will not even realize that the person has a mental health condition.

- Stress can affect the person's ability to function. Try to keep the pressure of the situation to a minimum.
- People who have psychiatric disabilities have varying personalities and different ways of coping with their disability. Some may have trouble picking up on social cues; others may be supersensitive. One person may be very high energy, while someone else may appear sluggish. Treat each person as an individual.
- Ask what will make him most comfortable and respect his needs to the maximum extent possible.
- In a crisis, stay calm and be supportive as you would with anyone. Ask how you can help, and find out if there is a support person who can be called. If appropriate, you might ask if the person has medication that he needs to take.

Cognitive Disabilities: Mental Retardation

PEOPLE WITH MENTAL RETARDATION (sometimes referred to as developmental disability) learn slowly.

They have a hard time using what they have learned and applying it from one setting or situation to another.

- Speak to the person in clear sentences, using simple words and concrete—rather than abstract—concepts. Help her understand a complex idea by breaking it down into smaller parts.
- Don't use baby talk or talk down to people who have mental retardation. Gauge the pace, complexity, and vocabulary of your speech according to hers.
- Remember that the person is an adult and, unless you are informed otherwise, can make her own decisions.
- People with mental retardation may be anxious to please. Questions should be phrased in a neutral way to elicit accurate information. Verify responses by repeating each question in a different way.
- It can be difficult for people with mental retardation to make quick decisions. Be patient and allow the person to take her time.
- Clear signage with pictograms can help a person who has mental retardation to find her way around a facility.
- People with mental retardation rely on routine and on the familiar to manage work and daily living. Be aware that a change in the environment or in a routine may require some attention and a period of adjustment.

Cognitive Disabilities: Learning Disabilities

LEARNING DISABILITIES ARE LIFELONG DISORDERS that interfere with a person's ability to receive, express or process information. Although they have certain limitations, most people with learning disabilities have

Cognitive Disabilities: Learning Disabilities

average or above-average intelligence. You may not realize that the person has a learning disability because he functions so well. Or you may be confused about why such a high-functioning person has problems in one aspect of his work.

- People with dyslexia or other reading disabilities have trouble reading written information. Give them verbal explanations and allow extra time for reading.
- Don't be surprised if you tell someone very simple instructions and he requests that you write them down, because spoken information gets "scrambled" as he listens. A person who has a learning disability such as auditory processing disorder may need information demonstrated or in writing.
- Ask the person how you can best relay information. Be direct in your communication. A person with a learning disability may have trouble grasping subtleties or interpreting nonverbal cues such as angry looks or sighs of frustration.
- It may be easier for the person to function in a quiet environment without distractions, such as a radio playing, people moving around or loudly patterned curtains.

Cognitive Disabilities: Traumatic (or Acquired) Brain Injuries (TBI)

PEOPLE WITH TRAUMATIC BRAIN INJURY have had damage to the brain usually as the result of trauma, such as an accident or stroke.

- Some of the factors that affect persons with learning disabilities also apply to persons with traumatic brain injury. People with brain injury may have a loss of muscle control or mobility that is not obvious. For example, a person may not be able to sign her name, even though she can move her

Cognitive Disabilities: Traumatic (or Acquired) Brain Injuries (TBI)

hand.

- A person with a brain injury may have poor impulse control. The person may make inappropriate comments and may not understand social cues or “get” indications that she has offended someone. In her frustration to understand, or to get her own ideas across, she may seem pushy. All of these behaviors arise as a result of the injury.
- A person with a brain injury may be unable to follow directions due to poor short-term memory or poor directional orientation. She may ask to be accompanied, or she may use a guide dog for orientation, although she does not appear to be mobility impaired.
- If you are not sure that the person understands you, ask if she would like you to write down what you were saying.
- The person may have trouble concentrating or organizing her thoughts, especially in an over stimulating environment, like a crowded movie theater or transportation terminal. Be patient. You might suggest going somewhere with fewer distractions.

Service Animals

SOME PEOPLE WHO are Deaf, blind or visually impaired, or who have traumatic brain injury, seizure disorder, or a range of other disabilities may use a service animal to assist them with daily living.

- While you may inquire whether an animal is a service animal, the person may not have information identifying it as such. This means that in general, you will need to modify a “no animals” policy to allow the person to enter with her service animal. Barring a direct threat to health and safety, this requirement of the ADA is generally thought to take precedence over any health codes, such as those for restaurants, and personal preferences, such

Service Animals

as taxi drivers prohibiting pets.

- Service animals are generally highly trained and well behaved. You may ask the person to remove the animal if the animal is not under her control.

Emergency Evacuation Procedures

PEOPLE WITH DISABILITIES must be considered in any facility's evacuation plan.

- Compile a voluntary list of people with disabilities who are regulars at your facility, such as employees, students or residents. While you are compiling this list, let people know that even though they may not consider themselves to be “disabled,” they should be included if they may need help during an emergency. For example, this might apply to someone whose asthma may be triggered by stress or smoke. Keep the list updated to include people who are temporarily disabled, such as a pregnant woman or someone with a broken leg.
- Interview each individual on the list to plan the most effective way to assist them in case of an emergency. For example, a person with a cognitive disability may get confused and need assistance in following directions. A person who is blind, even if he knows his way around the facility, will need to be accompanied during an emergency, especially when large numbers of people are involved.
- Also develop a plan, including a voluntary sign-in, for an emergency that may affect people who are not attached to the facility, such as customers, theatergoers, patients or other members of the public.
- Practice the evacuation procedures and keep your plans up to date.

Conflict Management

Sometimes conflicts arise between people with disabilities and the places

Conflict Management

they visit for fun, work, health care or education. These conflicts are usually the result of misunderstanding or a lack of information. Sometimes conflicts develop between people with disabilities who have conflicting needs. For example, a person who is hard of hearing cannot hear the proceedings with the window open, but a person with MCS needs the window open for fresh air; someone who uses a guide dog may run into a conflict with a person who has an anxiety disorder and an extreme fear of dogs.

All of these situations call for flexibility, patience, creativity, and open communication—a willingness to listen to the other person's perspective and to learn.

Sometimes good faith efforts are not enough and parties have difficulty working out their differences. In these cases, consider using the services of a skilled mediator.

Don't make decisions for people with disabilities about what they can or can't do.

A Final Word

PEOPLE WITH DISABILITIES are individuals with families, jobs, hobbies, likes and dislikes, problems and joys. While the disability is an integral part of who they are, it alone does not define them. Don't make them into disability heroes or victims. Treat them as individuals.

Disability Access Resource List

THIS LIST REPRESENTS SOME OF THE NATIONAL ORGANIZATIONS that provide information about some of the disabilities presented in this booklet. There are many disabilities that we did not address specifically and many more organizations. Consult one of the three

Disability Access Resource List

organizations at the beginning of this list or your local telephone directory for additional information or technical assistance.

GENERAL INFORMATION

- Northeast ADA and IT Center (NeDBTAC) 800-949-4232 (V/TTY)
607-255-2891 (TTY) *northeastada@cornell.edu*
www.northeastada.org
- Job Accommodations Network (JAN) 800-ADA-WORK (V/TTY)
jan@janweb.icdi.wvu.edu janweb.icdi.wvu.edu
- Access Board (Architectural and Transportation Barriers Compliance Board) 800-USA-ABLE (V/TTY) *info access board.gov*
www.access-board.gov

ENFORCEMENT AGENCIES

- U.S. Department of Justice 800-514-0301 (V) 800-514-0383 (TTY)
www.usdoj.gov/crt/ada/adahom1.htm
- Equal Employment Opportunity Commission (EEOC) 800-669-4000
(V) 800-669-6820 (TTY) www.eeoc.gov
- U.S. Department of Transportation 888-446-4511 (V)
www.fta.dot.gov
- Department of Housing and Urban Development Office of Fair
Housing and Equal Opportunity 800-343-3442 (V) 800-483-2209
(TTY) www.hud.gov/offices/fheo/index.cfm

RESOURCES FOR SPECIFIC DISABILITIES

Specific Disability	Phone & Website	
AIDS-HIV		
Centers for Disease Control (AIDS-HIV information) Hot Line	800-342-2437 (V) 800-243-7889 (TTY)	www.cdc.gov
Alcohol Meetings & Support Groups		
Al-Anon Information Services and Families	714-748-1113 888- 425-2666	www.orangecountvalanon.org
Alcoholics Anonymous (24 hours)	714-556-4555	www.oc-aa.org
Over 50 Group	714-556-4555	www.oc-aa.org
Allergies & Asthma		
American Allergy - Immunology	800-842-7777	www.aaaai.org
Asthma Allergy Foundation	800-624-0044	www.aafasocal.com
Asthma Info Line	800-822-2762	www.asthmamatters.com/AsthmaM/
ALS		
ALS Association - Orange County	949-587-9700	www.alsaoc.org
Alzheimer' s		
Alzheimer' s Living Solutions	800-752-3238	www.agelessdesign.com
Alzheimer' s Memory Assessment Clinic	949-824-5847	www.alz.uci.edu/about/contact.asp

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Specific Disability	Phone & Website	
Alzheimer's Association - National	800-272-3900	www.alz.org
Alzheimer's Association - Orange County	800-660-1993	www.alzoc.org
Alzheimer's Disease Diagnostic - UCI	949-824-2382	www.alz.uci.edu
Alzheimer's Disease Education & Referral	800-438-4380	www.alzheimers.org
Alzheimer's Legal Financial Info	800-272-3900	www.alz.org
Anemia		
Aplastic Anemia Foundation	800-747-2820	www.aplastic.org
Animals, Guide & Service		
Delta Society (Service Animal information)	425-226-7357	www.deltasociety.org
Eve Dog Foundation	800-393-3641	www.evedogfoundation.org
Guide Dog Foundation	800-548-4337	www.guidedog.org
Arthritis		
Arthritis Foundation Info Line	800-283-7800	www.arthritis.org
Lupus Foundation of America	949-833-2121	www.lupus.com
Brain Injuries (TBI)		
The Brain Injury Association	800-444-6443 (V)	www.biausa.org
Brain Health-Diagnosis	www.brain.com/brain/detailedProductInfo/links.jsp	

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Specific Disability	Phone & Website	
Brain Injury Assoc of America	800-444-6443	www.biausa.org
Orange Caregiver Resource Center	800-543-8312	www.caregiveroc.org
The Brain Research Institute	www.brainresearchinstitute.org	
Cancer		
American Cancer Society	949-261-9446	www.cancer.org
American Institute Cancer Research	800-843-8114	www.aicr.org
Breast Cancer Detection Program	800-511-2300 www.dhs.ca.gov/cancerdetection/breastcancer/breastcancer.htm	
Cancer Recovery	800-238-6479	www.cancerrecoverv.org
Cancer Research Institute	800-992-2623	www.cancerresearch.org
National Cancer Institute	800-422-6237	www.cancer.gov
Prostate Cancer Foundation	800-757-2873	www.prostatecancerfoundation.org
Cerebral Palsy (CP)		
United Cerebral Palsy Association	800-872-5UCP (V) 202-973-7197 (TTY) www.ucpa.org	
Chronic Pain		
American Chronic Pain Association	916-632-0922	www.theacpa.org
Continnence		
Simon Foundation for Continnence	800-2374666	www.simonfoundation.org

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Specific Disability	Phone & Website	
Crohn's Colitis		
Crohn's & Colitis Foundation of Amer.	800-932-2423	www.ccfa.org
Cystic Fibrosis (CF)		
Cystic Fibrosis Foundation	800-344-4823	www.cff.org
Dermatology		
American Dermatological Association	800-441-2737	www.aboutskinsurgery.com
Developmentally Disabled (DD)		
Down Syndrome Association of Orange County	714-547-2895	www.dsaoc.org
Learning Disabilities Association of America	412-341-1515 (V)	http://ldaamerica.org
Kiwanis Action Club (Vocational Visions)	949-837-7280	www.vocationalvisions.org
Diabetes		
American Diabetes Association	800-232-3472 (2343)	www.diabetes.org
Diabetes Education	800-832-6874	
El Toro Diabetics Ctr.	949-586-3664	
Disabilities		
Area Board XI, Developmental Disabilities Board	714-558-4404	www.scdd.ca.gov
Dayle McIntosh Center	714-621-3300 #319	http://daylemc.org

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Specific Disability	Phone & Website
Easter Seals Society	800-221-6827 www.easterseals.org
Genetically Handicapped Persons	800-639-0597 www.ochealthinfo.com/behavioral/amhs/olderadult.htm
The ARC	301-565-3842 (V) www.thearc.org
Epilepsy	
Epilepsy Foundation of America	800-332-1000 (TTY) 800-332-2070 www.epilepsyfoundation.org
Gastrointestinal (GI)	
International Foundation for Gastrointestinal	www.iffgd.org
Hearing	
Better Hearing Institute	800-327-9355 www.betterhearing.org
California Relay Service	800-867-4323 www.ddtp.org
Deaf Access to Medical Services	714-620-8341 www.sinai.orgdeaf_access/index.asp
National Association of the Deaf	301-587-1788 (V) 301-587-1789 (TTY) www.nad.org
National Institute on Deafness and Other Communication Disorders	800-241-1044 (V) 800-241-1055 (TTY) www.nidcd.nih.gov/index.asp
Registry of Interpreters of the Deaf	703-838-0030 (V) 703-838-0459 (TTY)
Self Help for Hard of Hearing People, Inc.	301-657-2248 (V) 301-657-2249 (TTY) www.shhh.org
Self-Help Hard of Hearing-Golden Ear	949-856-4088 www.shhhca.org

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Specific Disability	Phone & Website	
Heart		
American Heart Association	949-856-3555	www.americanheart.org
Heart Info Network	949-856-3555	www.theheart.org
Heart information		www.heartinfo.org
National Heart Lung, Blood Institute		www.nhlbi.nih.gov
Holistic Health		
American Holistic Health Association	714-779-6152	www.ahha.org
Huntington's Disease		
Huntington's Disease Society of Amer.	888-443-7252	www.hdsa.org
Huntington's Disease Support Group	714-578-8670	www.caregiver.org
Kidney		
American Association Kidney Patients	800-749-2257	www.aakp.org
American Kidney Fund	800-638-8299	www.akfinc.org
National Kidney Foundation, Southern California	800-747-5527	www.kidneysocal.org
Leukemia and Lymphoma		
Leukemia and Lymphoma Society	888-535-9300	www.leukemia.org
Lymphoma Research Foundation	310-204-7040	www.lymphoma.org

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Specific Disability	Phone & Website	
Little People		
Little People of America	888-LPA-2001	www.lpaonline.org
Liver		
American Liver Foundation	800-465-4837	www.liverfoundation.org
Lung		
American Lung Association, OC	714-835-5864	www.oclung.org
Lung Line Info Service	800-222-5864	www.callforhelpinc.org
Mental Health		
NAMI (National Alliance on Mental Illness)	888-999-NAMI (6264)	www.nami.org
Mental Health Association	714-547-7559	www.mhaoc.org
H.O.M.E.S. Inc.	949-851-2766	www.homesinc.org
Multiple Sclerosis (MS)		
National Multiple Sclerosis Society	949-752-1680	www.nationalmssociety.org
Muscular Dystrophy (MD)		
Muscular Dystrophy Association	714-550-0161	800-572-1717 www.mdausa.org
Osteoporosis		
National Osteoporosis Foundation	202-223.2226	www.nof.org
Osteoporosis, Los Angeles	310-423-3277	www.cedars-sinai.edu

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Specific Disability	Phone & Website	
Osteoporosis National Resource Center	800-624-2663	www.osteoporosis.org
Ostomy		
United Ostomy Association	800-826-0826 #0642	Laguna Hills CA Chapter www.uoa.orgchapters_states.htm
Paralysis		
American Paralysis Association	949-673-8474	www.apacure.com
Christopher Reeves Paralysis Association	949-673-8474	800-225-0292 www.christopherreeve.org
Paralyzed Veterans	800-424-8200	www.pva.org
Spinal Cord Injury Network	800-548-2673	www.spinalcordinjury.org
United Spinal Association	718-803-3782 (V-TTY)	www.unitedspinal.org
Parkinson's		
American Parkinson Disease Association	800-400-2732	www.apdaparkinson.org
Polio		
Polio Survivors Plus: Laguna Woods Call for meeting date and time	949-859-7372	www.post-polio.org
Psoriasis		
National Psoriasis Foundation	800-723-9166 800-723-9167	www.psoriasis.org

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Specific Disability	Phone & Website	
Speech		
California Relay Service: TTY, Voice, Hearing Carry Over, Voice Carry Over, Speech to Speech	711 www.fcc.gov/cgb/consumerfacts/711.html www.sprint-crs.com	
Stroke		
American Stroke Association	800-553-6321	www.strokeassociation.org
National Stroke Association	800-787-6537	www.stroke.org
Tourette Syndrome		
Tourette Syndrome Association	718-224-2999	www.tsa-usa.org
Vision		
American Council for the Blind	800-424-8666 (V)	202-467-5081 (V) www.acb.org
American Foundation for the Blind	800-232-5463	www.afb.org
Braille Institute	714-821-5000	www.brailleinstitute.org
Macular Degeneration Center, L.A.	888 430-9898	www.amd.org
National Association for the Visually Handicapped	212-889-3141 (V)	www.navh.org
Prevent Blindness America	800-331-2020 800-331-2021	www.preventblindness.org
Orange County, California Agencies		
Council on Aging-Orange County	714-479-0107	<u>www.coaoc.org</u>

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Specific Disability	Phone & Website
Health Care Council of Orange County	714-558-0940 www.healthoc.com
Info Link Orange County	211 www.211.org Human Services Information
Legal Aid Society of Orange County	800-834-5001 714-571-5200 websites www.legal-aid.com
Leisure World-Social Services: Laguna Woods	949-597-4267 www.lwlagunawoods.com
Leisure World-Health Care Ctr.: Seal Beach	562-493-9581 www.lwsb.com
Office on Aging	1-800-510-2020 www.officeonaging.ocgov.com
O.C. Adult Protective Services	(800) 451-5155 www.ssa.ocgov.com/Agency_Services/
Caregiver	
O.C. IHSS Public Authority	(714) 480-6446 www.ocgov.com/publicauth/index.asp
Orange Caregiver Resource Center	714-578-8670 www.caregiveroc.org
Death - Hospice and Grief Support	
Americans for Better Care of the Dying	www.abcd-caring.org
Bereavement Kit — Moving on	800-896-3650 www.nfcacares.org
Crisis Emotional & Spiritual Support	www.careguideathome.com/modules.php
End of Life Issues - Services	www.caringinfo.org
Estate Planning Links	www.estateplanninglinks.com

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Specific Disability	Phone & Website	
Home Care-Hospice Agency Locator	202 547-7424	www.nahc.org
Hospice Association of America	202/546-4759.	www.hospice-america.org
California Hospice Foundation	916 441-3770	www.calhospice.org
U.S. Living Will Registry	800-548-9455	www.uslivingwillregistry.com
Prevention and Education		
Alcohol & Drug Education & Prevention Team (ADEPT)	714-834-4058	www.ochealthinfo.com
Caring Connections Friendly Visitor Program	714 479-0107 or 714 560-0424 www.coaoc.org	
Center for Addiction & Substance	212-841-5200	www.casacolumbia.org
Community Service Program, Inc. (CSP)	949-757-1096	www.cspinc.org
County of Orange Health Care Agency (Older Adult Services, START & SHOPP)	714-972-3700	www.ochealthinfo.com
National Clearinghouse for Alcohol & Drug Information	800-729-6686	www.health.org
Office on Aging-Health Promo & Disease Prevent	1-800-510-2020	www.officeonaging.ocgov.com
Pacific Clinics Behavioral & Mental Health	Laguna Niguel: (949) 360-5810; Orange: (714) 712-8340; Westminster: (714) 901-4629	

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Specific Disability	Phone & Website	
Elder Fiduciary and Substance Abuse		
Adult Protective Services (Elder Abuse)	714-825-3030 www.ssa.ocgov.com/Agency_Services	800-451-5155
Elder Abuse Prevention & Safe Options for Seniors	949-854-3554 24 hour crisis hotline	www.humanoptions.org
Crisis Line — State Referral Line	800-231-4024	www.aging.ca.gov
Financial Abuse - FAST	714-479-0107	www.coaoc.org
Long Term Care Ombudsman Services (Nursing Home)	714-479-0107	www.coaoc.org
National Domestic Violence Hotline	1-800-799-7233 (V)1-800-787-3224 (TTY)	www.ndvh.org
Recovery Outreach Programs		
Health Care Agency	949-643-6930	www.ochealthinfo.com
National Center for Environmental Health Strategies	856-429-5358	www.ncehs.org
Orange County Health Care Agency - Older Adult Services	714-972-3700	www.ochealthinfo.com
South Coast Medical Center	949-499-7501	www.southcoastmedcenter.com
University of California at Irvine	949-824-7494	www.disability.uci.edu

Saddleback Memorial Medical Center Support Groups (SG)

Call for information: 949-452-7255

Bereavement SG	Brain Injury SG
Diabetes Challengers SG	Mended Hearts
Men's Grief SG	Parkinson's SG
Osteoporosis SG	Stroke Club SG
Serious or Life-Threatening Illness SG	

Leisure World® Support Groups / Clubs Residents Only

For Day & Time Call LW Recreation at 949-597-4273

AA	Al-Anon Family Groups
HI Club	Nicotine Anonymous
Polio Survivors Plus	TOPS
Visually Impaired Group	

Leisure World® Social Services Call 949-597-4267

Bereavement Group	Caregivers Group
Friendly Visitor Program	Successful Aging Group

Saddleback Kiwanis Club Groups

Elvan Whiteleather: 949-457-1499 or Jim Shaffer: 949-583-0510

Aktion Club	Stroke Club
Low Vision	Special Olympics

REPRINTS

If you would like to order multiple reprints of this booklet please Email Denise Welch at DennyWelch@lworld.net or DennyWelch@AOL.com.